[ ]  1. Check service information for the suggested method and procedures to follow when

Evaluation (Enter number from 4, 3, 2, 1) :\_\_\_\_\_\_\_\_\_

Meets ASE Task: A7 – A-5 – P-2

Time on Task:\_\_\_\_\_\_\_\_\_\_\_\_\_

Make/Model/Year:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

VIN:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Air Conditioning Noise Diagnosis**

diagnosing abnormal noise concerns (describe procedure): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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[ ]  2. Describe the noise (check all that apply):

 \_\_\_\_\_[ ]  a. Under the hood

 \_\_\_\_\_[ ]  b. Inside the passenger compartment

 \_\_\_\_\_[ ]  c. Wind noise

 \_\_\_\_\_[ ]  d. Rattle

 \_\_\_\_\_[ ]  e. Shriek

 \_\_\_\_\_[ ]  f. Squeal

 \_\_\_\_\_[ ]  Other (describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  3. After diagnosis of the noise using the recommended procedures, what is the necessary

 action? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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