



## **Gasoline Direct Injection Identification**

Meets ASE Task: A8 - A-1 - P-1 Name:\_\_\_\_\_\_ Date:\_\_\_\_\_ Time on Task:\_\_\_\_\_ Make/Model/Year:\_\_\_\_\_\_ VIN:\_\_\_\_\_ Evaluation (Enter number from 4, 3, 2, 1): 1. Check service information to determine if the vehicle being serviced is equipped with gasoline direct injection. (Check all that apply) Gasoline direct injection only Port and gasoline direct injection system 2. List the specifications as found in service information. a. Lift pump pressure = b. Lift pump volume = c. High-pressure system pressure = d. Fuel injector resistance = \_\_\_\_\_ e. Other (describe) 3. What are the specified maintenance procedures required (if any)? Describe:

