

Bleed ABS Hydraulic Circuits

Meets ASE Task: A5 – G-3 – P-1

Name: _____ Date: _____ Time on Task: _____

Make/Model/Year: _____ VIN: _____

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

- ☐ 1. Check the service information and state the vehicle manufacturer's specified bleeding procedure and sequence.

- ☐ 2. What is the type of brake fluid specified for use during the bleeding procedure?

- ☐ 3. Was a scan tool required? ☐ Yes ☐ No If yes, describe the procedure:

- ☐ 4. Was a special tool or tools required? ☐ Yes ☐ No If yes, describe the procedure:

- ☐ 5. Was the bleeding procedure the same for both the front and the rear wheel brakes?

☐ Yes ☐ No