



Test and Replace Coolant

Name:		Date:	Time on Task:
Make/Model/Year:		VIN:	
Evaluation (Enter num	ber from 4, 3, 2, 1) :		
	neck service information for the recommended coolant testing, recover, flushing, and refilling ocedures.		
2. What is	the recommended coolant?		
	oling system equipped with bloogsystem when it is refilled?	eeder valves to help with b	oleeding trapped air from the
]	□ No □ Yes (descr	ibe location)	