[ ]  1. Check service information for the specified methods to follow to check the seals, vents, and lube level (describe).

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

Meets ASE Task: A3 - F-4 – P-2

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

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

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

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

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

**Transfer Case Lube Level/Leak Check**

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[ ]  2. What is the specified lube? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  3. Were the vents clear? Yes [ ] \_\_\_\_ No [ ] \_\_\_\_If no, describe why they were clogged.

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 [ ]  4. Were the seals okay? Yes [ ] \_\_\_\_ No [ ] \_\_\_\_If no, describe which seals were leaking.

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