

CHECK LIST FOR INTERVIEW

ABS (DIAGNOSTICS)

2. Check List for Interview

A: CHECK

Check the following items about the vehicle's state.

1. STATE OF ABS WARNING LIGHT

ABS warning light comes on.	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Only once <input type="checkbox"/> Does not come on • When / how long does it come on?:		
Ignition key position	<input type="checkbox"/> LOCK <input type="checkbox"/> ACC <input type="checkbox"/> ON (before starting engine) <input type="checkbox"/> START <input type="checkbox"/> On after starting (Engine is running) <input type="checkbox"/> On after starting (Engine is stop)		
Timing	<input type="checkbox"/> Immediately after ignition is ON. <input type="checkbox"/> Immediately after ignition starts.		
	<input type="checkbox"/> When advancing		km/h to km/h
			MPH to MPH
	<input type="checkbox"/> While traveling at a constant speed	km/h	MPH
	<input type="checkbox"/> When decelerating		km/h to km/h
			MPH to MPH
	<input type="checkbox"/> When turning to right	Steering angle :	deg
		Steering time :	sec
	<input type="checkbox"/> When turning to left	Steering angle :	deg
		Steering time :	sec
<input type="checkbox"/> When moving other electrical parts	• Parts name : • Operating condition :		

2. STATE OF BRAKE WARNING LIGHT

Brake warning light comes on.	<input type="checkbox"/> Always <input type="checkbox"/> Sometimes <input type="checkbox"/> Only once <input type="checkbox"/> Does not come on <input type="checkbox"/> When parking brake lever is pulled <input type="checkbox"/> When parking brake lever is released • When / how long does it come on?:		
Ignition key position	<input type="checkbox"/> LOCK <input type="checkbox"/> ACC <input type="checkbox"/> ON (before starting engine) <input type="checkbox"/> START <input type="checkbox"/> On after starting (Engine is running) <input type="checkbox"/> On after starting (Engine is stop)		

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Timing	<input type="checkbox"/> Immediately after ignition is ON. <input type="checkbox"/> Immediately after ignition starts.		
	<input type="checkbox"/> When advancing		km/h to km/h
			MPH to MPH
	<input type="checkbox"/> While traveling at a constant speed	km/h	MPH
	<input type="checkbox"/> When decelerating		km/h to km/h
			MPH to MPH
	<input type="checkbox"/> When turning to right	Steering angle :	deg
		Steering time :	sec
	<input type="checkbox"/> When turning to left	Steering angle :	deg
		Steering time :	sec
<input type="checkbox"/> When operating other electrical parts			
<ul style="list-style-type: none"> • Parts name : • Operating condition : 			

3. SYMPTOMS

ABS operating condition	<input type="checkbox"/> Does not operate.		
	<input type="checkbox"/> Operates only when abruptly applying brakes.	Vehicle speed :	km/h
			MPH
	• How to step on brake pedal :		
	a) Operating time :		sec
	b) Operating noise : <input type="checkbox"/> Produce / <input type="checkbox"/> Does not produce		
	• What kind of noise?	<input type="checkbox"/> Knock <input type="checkbox"/> Gong gong <input type="checkbox"/> Bong <input type="checkbox"/> Buzz <input type="checkbox"/> Gong gong buzz <input type="checkbox"/> Others :	
		c) Reaction force of brake pedal	
	<input type="checkbox"/> Stick <input type="checkbox"/> Press down once with a clunk <input type="checkbox"/> Press and released <input type="checkbox"/> Others :		

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Behavior of vehicle	a) Directional stability cannot be obtained or steering refuses to work when applying brakes : <input type="checkbox"/> Yes / <input type="checkbox"/> No	
	• When :	<input type="checkbox"/> Vehicle turns to right <input type="checkbox"/> Vehicle turns to left <input type="checkbox"/> Spins <input type="checkbox"/> Others :
	b) Directional stability cannot be obtained or steering refuses to work when accelerating : <input type="checkbox"/> Yes / <input type="checkbox"/> No	
	• When :	<input type="checkbox"/> Vehicle turns to right <input type="checkbox"/> Vehicle turns to left <input type="checkbox"/> Spins <input type="checkbox"/> Others :
	c) Brakes out of order : <input type="checkbox"/> Yes / <input type="checkbox"/> No	
	• What :	<input type="checkbox"/> Braking distance is long <input type="checkbox"/> Brakes lock or drag <input type="checkbox"/> Pedal stroke is long <input type="checkbox"/> Pedal sticks <input type="checkbox"/> Others :
	d) Poor acceleration : <input type="checkbox"/> Yes / <input type="checkbox"/> No	
	• What :	<input type="checkbox"/> Fails to accelerate <input type="checkbox"/> Engine stalls <input type="checkbox"/> Others :
	e) Occurrence of vibration : <input type="checkbox"/> Yes / <input type="checkbox"/> No	
	• Where • What kind :	
f) Occurrence of abnormal noise : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
• Where • What kind :		
g) Occurrence of other phenomena : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
• What kind :		

4. CONDITIONS UNDER WHICH TROUBLE OCCURS

Environment	a) Weather	<input type="checkbox"/> Fine <input type="checkbox"/> Cloudy <input type="checkbox"/> Rainy <input type="checkbox"/> Snowy <input type="checkbox"/> Various/Others :
	b) Ambient temperature	°C (°F)
	c) Road	<input type="checkbox"/> Urban area <input type="checkbox"/> Suburbs <input type="checkbox"/> Highway <input type="checkbox"/> General road <input type="checkbox"/> Ascending slope <input type="checkbox"/> Descending slope <input type="checkbox"/> Paved road <input type="checkbox"/> Gravel road <input type="checkbox"/> Muddy road <input type="checkbox"/> Sandy place <input type="checkbox"/> Others :
	d) Road surface	<input type="checkbox"/> Dry <input type="checkbox"/> Wet <input type="checkbox"/> New-fallen snow <input type="checkbox"/> Compressed snow <input type="checkbox"/> Frozen slope <input type="checkbox"/> Others :

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Condition	a) Brakes	Deceleration : _____ g	
		<input type="checkbox"/> Continuous / <input type="checkbox"/> Intermittent	
	b) Accelerator	Acceleration : _____ g	
		<input type="checkbox"/> Continuous / <input type="checkbox"/> Intermittent	
	c) Vehicle speed	km/h _____	MPH _____
		<input type="checkbox"/> Advancing <input type="checkbox"/> Accelerating <input type="checkbox"/> Reducing speed <input type="checkbox"/> Low speed <input type="checkbox"/> Turning <input type="checkbox"/> Others : _____	
	d) Tire inflation pressure	Front RH tire : _____	kPa
		Front LH tire : _____	kPa
		Rear RH tire : _____	kPa
		Rear LH tire : _____	kPa
	e) Degree of wear	Front RH tire : _____	
		Front LH tire : _____	
		Rear RH tire : _____	
		Rear LH tire : _____	
	f) Genuine parts are used. : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
	g) Chain is passed around tires. : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
	h) T tire is used. : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
	i) Condition of suspension alignment :		
	j) Loading state :		
	k) Repair parts are used. : <input type="checkbox"/> Yes / <input type="checkbox"/> No		
• What :			
l) Others :			