



# Noise and Water Leaks Client Concern Questionnaire

Customer Name:		Date:	
Repair Order #:		License #:	
Service Advisor:		VIN #:	

## DEFINE THE PROBLEM

(check both if applicable)

- Noise
- Water leak

### TYPE OF SOUND

- |            |                              |                             |
|------------|------------------------------|-----------------------------|
| Clicking   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Rattle     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Thump      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Tinging    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Buzz       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Squeak     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Wind Noise | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Other      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

### LOCATION OF SOUND

(describe on reverse if necessary)

- |                |                              |                             |
|----------------|------------------------------|-----------------------------|
| Interior       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Exterior       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Front          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Rear           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Driver Side    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Passenger Side | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

### WATER LEAK

Please describe the leak(s) and where it seems to be coming from (use reverse side if necessary).

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### THE PROBLEM OCCURS...

- Rarely
- Sometimes
- Always

## IT OCCURS AS FOLLOWS:

### WHEN THE PROBLEM OCCURS

- Light to medium acceleration
- Hard acceleration
- Deceleration (foot off accelerator)
- Cruising (constant highway speed)
- Braking
- Turning
- In reverse
- First thing in the morning
- Going over bumps
- Normal road
- Rough road
- Wet road
- With vehicle occupants

### WHEN THE WATER LEAK OCCURS

- On level ground
- On an incline
  - Forward
  - Rearward
- Light rain
  - Medium Rain
  - Heavy Rain
- Winter conditions
- Automatic car wash
- Power wand wash
- Hand wash

### SPEED OF VEHICLE

Describe the speed at which the problem occurs:

- Vehicle speed \_\_\_\_\_ (km/h)
- Engine speed \_\_\_\_\_ (rpm)
- Idle                       Medium                       High
- Engine temp
- Cold                       Warm                       Hot
- Which accessories are on when noise occurs?
- A/c                       Stereo                       Heater
- Does any action stop / change the noise?

Client Signature: \_\_\_\_\_