

Check List for Interview

CONTINUOUSLY VARIABLE TRANSMISSION (DIAGNOSTICS)

2. Check List for Interview

A: CHECK

Check the following items when a problem has occurred.

NOTE:

Use copies of this page for interviewing customers.

Customer's name			
Date of purchase			
Date of repair			
Transmission model	Transmission	V.I.N.	
Odometer reading	km (miles)		
Frequency	<input type="checkbox"/> Continuous <input type="checkbox"/> Intermittent (times/day)		
Weather	<input type="checkbox"/> Fine <input type="checkbox"/> Cloudy <input type="checkbox"/> Rainy <input type="checkbox"/> Snowy <input type="checkbox"/> Other ()		
Place	<input type="checkbox"/> Highland <input type="checkbox"/> Suburbs <input type="checkbox"/> Inner city <input type="checkbox"/> Uphill <input type="checkbox"/> Downhill <input type="checkbox"/> Rough road <input type="checkbox"/> Other ()		
Ambient air temperature	<input type="checkbox"/> Hot <input type="checkbox"/> Warm <input type="checkbox"/> Cool <input type="checkbox"/> Cold		
Vehicle speed	km/h (MPH)		
AT OIL TEMP light	<input type="checkbox"/> Blinks continuously <input type="checkbox"/> Does not blink		
Select lever position	<input type="checkbox"/> P <input type="checkbox"/> R <input type="checkbox"/> N <input type="checkbox"/> D <input type="checkbox"/> Manual mode		
Driving condition	<div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <input type="checkbox"/> Not affected <input type="checkbox"/> At racing <input type="checkbox"/> While decelerating <input type="checkbox"/> While EV traveling </div> <div style="width: 30%;"> <input type="checkbox"/> At starting <input type="checkbox"/> While accelerating <input type="checkbox"/> While turning (<input type="checkbox"/> RH/<input type="checkbox"/> LH) </div> <div style="width: 35%;"> <input type="checkbox"/> While idling <input type="checkbox"/> When cruising (Vehicle speed km/h) <input type="checkbox"/> Immediately after starting the engine </div> </div>		
Manual mode	<input type="checkbox"/> ON <input type="checkbox"/> OFF		
Symptoms	<input type="checkbox"/> Vehicle does not move (<input type="checkbox"/> Any position <input type="checkbox"/> Particular position)		
	<input type="checkbox"/> Vehicle does not move (no load racing condition as in N range)		
	<input type="checkbox"/> Vehicle does not move (engine speed does not increase, felt as stall condition)		
	<input type="checkbox"/> Noise or vibration (Describe concretely:)		
	<input type="checkbox"/> Shock felt at N → D selection (seconds after shifting, when engine cold or after warm-up)		
	<input type="checkbox"/> Shock felt at N → R selection (seconds after shifting, when engine cold or after warm-up)		
	<input type="checkbox"/> Shifting is wrong (Describe concretely:)		
	<input type="checkbox"/> Shock or judder during driving		
	<input type="checkbox"/> Fails to accelerate.		
	<input type="checkbox"/> Engine speed increases abruptly during driving		
	<input type="checkbox"/> Shock or judder during standing start		
	<input type="checkbox"/> Select lever does not move		
	<input type="checkbox"/> Other ()		