


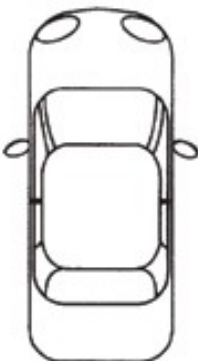



# FULL CIRCLE SERVICE REPORT CARD

Customer Name: \_\_\_\_\_ Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Date: \_\_\_\_\_ License: \_\_\_\_\_ Year/Model: \_\_\_\_\_

VIN: \_\_\_\_\_ RO/Tag#: \_\_\_\_\_ Mileage: \_\_\_\_\_

INSPECTION RESULT - OK		WILL REQUIRE FURTHER ATTENTION		REQUIRES IMMEDIATE ATTENTION	
Inspect Each Service		Info. / Estimate		Check Tires/Measure Tire Tread Depth	
CHECK & FILL	<input type="checkbox"/>	<input type="checkbox"/>	Window washer fluid level		<b>Tire Pressure Set to Factory Recommendation</b> 
	<input type="checkbox"/>	<input type="checkbox"/>	Automatic transmission fluid level/condition		
	<input type="checkbox"/>	<input type="checkbox"/>	Brake fluid level/condition		
	<input type="checkbox"/>	<input type="checkbox"/>	Power steering fluid level/condition		
	<input type="checkbox"/>	<input type="checkbox"/>	Coolant recovery reservoir fluid level/condition		
	<input type="checkbox"/>	<input type="checkbox"/>	Transaxle, transfer case, clutch reservoir fluid/condition (as equipped)		
	<input type="checkbox"/>	<input type="checkbox"/>	Windshield for cracks, chips and pitting		
	<input type="checkbox"/>	<input type="checkbox"/>	Operation of horn, interior and exterior lights		
	<input type="checkbox"/>	<input type="checkbox"/>	Windshield washer spray and wiper operation		
	<input type="checkbox"/>	<input type="checkbox"/>	Cooling system for visible leaks and damage		
<input type="checkbox"/>	<input type="checkbox"/>	Oil and/or fluid leaks (Specify _____)		<b>Measure Front / Rear Brake Linings</b> 	
<input type="checkbox"/>	<input type="checkbox"/>	Constant velocity (CV) drive axle boots (if equipped)			
<input type="checkbox"/>	<input type="checkbox"/>	Exhaust system (leaks, visible damage, loose parts)			
<input type="checkbox"/>	<input type="checkbox"/>	Drive belt(s)			
<input type="checkbox"/>	<input type="checkbox"/>	Steering, steering linkages/wheel end play/bearings			
<input type="checkbox"/>	<input type="checkbox"/>	Suspension (shocks/struts for bounce/leaks/damage)			
<input type="checkbox"/>	<input type="checkbox"/>	Brake lines, hoses, parking brake			
<input type="checkbox"/>	<input type="checkbox"/>	Battery terminals (clean, if necessary)			
<input type="checkbox"/>	<input type="checkbox"/>	Clutch operation (if equipped)			
<b>Recommended Additional Services</b>					<b>Brake Measurements Not Taken This Service Visit</b> <input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	Rotate Tires		<b>50% or more remaining</b> (Above 5mm Disc) (Above 2mm Drum)	
<input type="checkbox"/>	<input type="checkbox"/>	Air Filter		<b>20% - 50% remaining</b> (3mm-5mm Disc) (1.01mm-2mm Drum)	
<input type="checkbox"/>	<input type="checkbox"/>	Wiper Inserts		<b>Less than 20% remaining</b> (Less than 3mm Disc) (1mm or less Drum)	
<input type="checkbox"/>	<input type="checkbox"/>	Tire Repair		<b>Check Battery Performance</b>	
<input type="checkbox"/>	<input type="checkbox"/>	Brakes (Specify)		 Actual Cold Cranking Amps and/or attach test results: _____	
<input type="checkbox"/>	<input type="checkbox"/>	Full Factory Warranty in Effect		<input type="checkbox"/> Good <input type="checkbox"/> Bad	
<input type="checkbox"/>	<input type="checkbox"/>	Vehicle Service Contract			
<input type="checkbox"/>	<input type="checkbox"/>	CPO Extension			
<input type="checkbox"/>	<input type="checkbox"/>	Other			

Customer Signature \_\_\_\_\_