

BRAKE ISSUE QUESTIONNAIRE

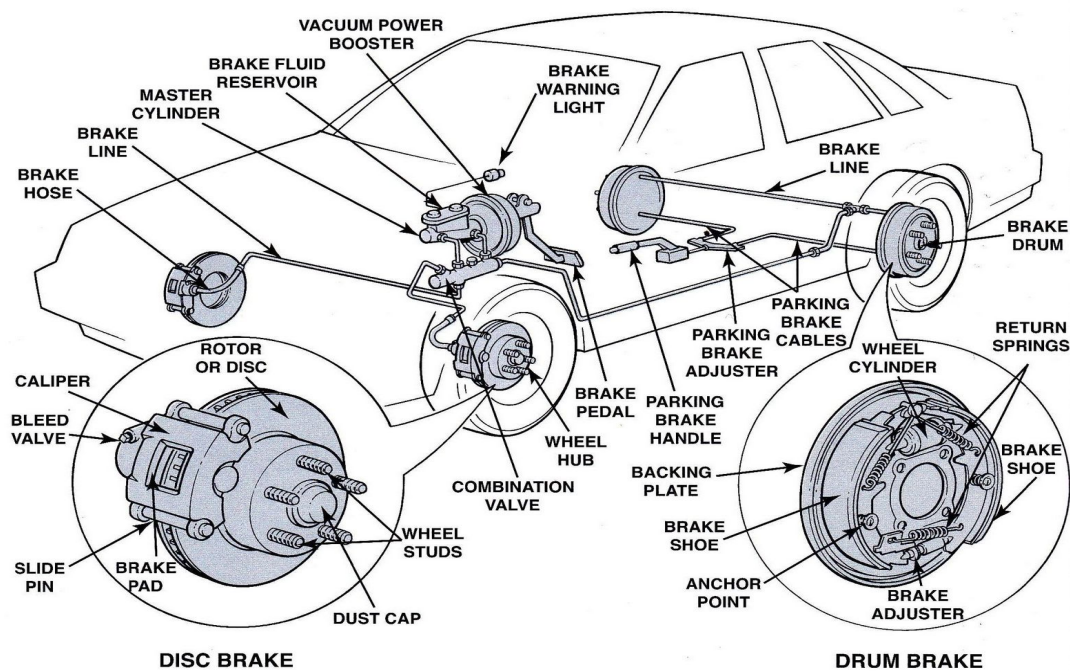
Please take a moment to complete our pre-appointment **Brake System Questionnaire**. The questions below offer us insight to your symptoms and any previous repairs. They are used to help us locate and repair your vehicle concerns, saving you time and money.

Name:

License Plate:

Do you wheel have locks? ☐ Yes Location _____ ☐ No

Typical Brake System Components



"Brake Noise"

I hear a brake noise: ☐ Never ☐ All the time. ☐ Anytime I apply the brakes.

☐ The noise goes away when I apply the brakes.

I would describe the noise as: ☐ Squeal. ☐ Grind. ☐ Thumping. ☐ Rattle

What area would you say the noise comes from? ☐ Not sure.

☐ Left front wheel. ☐ Right front wheel. ☐ Left rear wheel. ☐ Right rear wheel.

Noise comments:

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"Symptom"

I would the symptom a ☐ Low brake pedal. ☐ Spongy pedal.

☐ Steering wheel shakes while braking at: ☐ Low speeds. ☐ High speeds. ☐ All speeds.

☐ Brake pedal pulsates at: ☐ Low speeds. ☐ High speeds. ☐ All speeds.

☐ Vehicle Pulls / Drifts: ☐ Left while braking. ☐ Right while braking.

Symptoms comments:

"Warning Lights"

Brake warning light on? ☐ Yes ☐ No

If yes: ☐ ABS Light. ☐ Brake warning light. ☐ On all the time. ☐ On intermittently.

"History"

Any brake service or repair performed in the past? ☐ Yes. ☐ No.

If yes how long ago? ☐ 1 to 12 months. ☐ 1 to 3 years. ☐ > Than 3 years.

Description of repairs if you know:

I have paper work from previous service I can bring. ☐ Yes ☐ No