

Date: _____

Midas Touch™ Visual Courtesy Check



Customer: _____

CSR #: _____

EST #: _____

License Plate: _____

Mi/Km: _____

Year/Make/Model: _____

Trust the Midas touch®

No immediate attention	May require future attention	Immediate attention
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Check Following					
Inspection/License due date: If applicable _____					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exterior Condition	LF	LR RF RR OK
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Missing Hubcaps	LF	LR RF RR OK
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Starting System	Slow to Crank	Noisy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine	Engine Light On	Rough Idle Noisy Stalls/Hesitates
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wipers & Spray	Inop.	Torn Bent Chatter/Striking
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windshield	Cracked	Chipped
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission	Slipping	Noisy Harsh shifts
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Heat/AC	Inop. Fan Speed	Poor Airflow
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Horn	Inop.	Poor Tone
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interior/Exterior Lighting	Inop.	Damaged Lens

Check Under Hood				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hood Supports	Missing Inop. Damaged
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Battery/Cables	CCA Rating _____ CCA Actual _____ Out of Spec. Corroded
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air Filter	Missing Restricted OE Interval
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radiator	Leaking Corrosion Damaged
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Water Pump	Leaking Noisy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coolant Hoses	Cracked Leaking Spongy
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Belts (except timing belt)	Missing Cracked Frayed

Check Fluids				
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Window Washer Fluid	Filled
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine Oil	Level Condition OE Interval
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coolant	Level pH _____ Freeze Point _____ OE Interval Filled
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission Fluid	Level Condition OE Interval Filled
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power Steering Fluid	Level Condition OE Interval Filled
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brake Fluid	Level Copper ppm _____ OE Interval ppm

0 10 57 100 200 300

REQUIRED 200 ppm or greater

Check Under Vehicle					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Steering System	Bent Seized Torn Boot Loose	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shocks & Struts	Leaking Bent Seized Worn	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Brake Lines/Hoses	Leaking Rusted/Damaged Cracked	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fuel Lines/Hoses	Leaking Restricted Cracked	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exhaust System	Leaking Loose Rattle	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engine Leaks/Mounts	Fluid Leak Broken Mount	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmission Leaks/Mounts	Fluid Leak Broken Mount	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Driveline (Axle/CV Shaft)	Torn Boot Worn/Binding joint	

Check Tires		
Tire size O.E. _____ / _____ / _____ Actual _____ / _____ / _____		
	Tread Depth	
	<input type="checkbox"/> 7/32" or Greater <input type="checkbox"/> 3/32" to 6/32" <input type="checkbox"/> 2/32" or Less	
	LF <input type="checkbox"/>	RF <input type="checkbox"/>
	LR <input type="checkbox"/>	RR <input type="checkbox"/>
Wear Pattern/ Damage LF <input type="checkbox"/>	Air Pressure Before After LF <input type="checkbox"/>	Tire Check/OE Interval Suggests: <input type="checkbox"/> Alignment <input type="checkbox"/> Balance <input type="checkbox"/> Rotation <input type="checkbox"/> New tire

Brake Symptom Observed			
<input type="checkbox"/> Low Pedal	<input type="checkbox"/> Hard Pedal	<input type="checkbox"/> Warning Light	<input type="checkbox"/> Full Evaluation Suggested
<input type="checkbox"/> Pulsation	<input type="checkbox"/> Noise	<input type="checkbox"/> None at this time	<input type="checkbox"/> Full Evaluation Requested By Customer

Technician Comments: _____

Tech Initials _____ Service Advisor Initials _____

Do you follow your vehicle's factory scheduled maintenance (FSM) program? Yes No

Your next service interval is scheduled at _____ miles/kilometres

The Midas Touch™ Visual Courtesy Check is a visual check only. This Courtesy Check will not include the teardown, dismantling or removal of any component part or system inspected. The results of this Courtesy Check will be provided to you. Depending upon the results of this Courtesy Check, if you desire additional inspection work and/or parts, it will be necessary for you to authorize any additional inspection, work and/or parts.

Yes No

How'd it go... We want to know... REALLY!
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