

Vehicle Identification Number (VIN)

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17S09 VEHICLE INSPECTION / CHECK SHEET

ATTACHMENT IV
INSPECTION / CHECK SHEET
SAFETY RECALL 17S09

Technician ID: _____ Repair Order#: _____

Vehicle Mileage: _____ Repair Date: _____

Vehicle Build Date: _____ Open FSA(s): _____

INSTRUCTIONS: Complete this Inspection / Check Sheet and attach / file it with the recall repair order following completion.

1. Record any DTCs present. Check appropriate box.

- Pass - No DTCs present.
- Fail - DTCs present.

If fail, document any DTCs retrieved below, and reference during "Procedure B".

2. Inspect the coolant level and coolant concentration in the degas bottle. Check appropriate box.

- Pass - Coolant level **is** correct in the degas bottle.
- Fail - Coolant level **is not** correct in the degas bottle, needed to add coolant.
- Pass - Coolant concentration **is** correct.
- Fail - Coolant concentration **is not** correct, needed to adjust coolant concentration.

If fail, document any repairs performed below.

3. Pressure test cooling system. Check appropriate box.

- Pass - Cooling system holds pressure for 2 minutes.
- Fail - Cooling system **does not** hold pressure for 2 minutes.

If fail, document any repairs performed below.

4. Visually check for coolant leaks with the system under pressure. Check appropriate box.

- Pass - No coolant leak(s) found.
- Fail - Coolant leak(s) found.

If fail, document any repairs performed below.

5. Visually inspect the engine oil level and check for engine oil leaks at the rear surface of cylinder head, above exhaust manifold. Check appropriate box.

- Pass - No engine oil leak(s) found.
- Fail - Engine oil leak(s) found.
- Pass - Correct oil level.
- Fail - Engine oil not at correct level.

If fail, document any repairs performed below.

