05HHV–01

CUSTOMER PROBLEM ANALYSIS CHECK

CRUISE CONTROL SYSTEM Check Sheet

Inspector's name: _____

Customer's Name		**VIN**	
		Production Date	
		Licence Plate No.	
Date Vehicle Brought in		**Odometer Reading**	**km mile**

Condition of Problem Occurrence	Date Problem Occurred	
	Frequency Problem occurs	☐ Continuous ☐ Intermittent (times a day)
	Vehicle Speed When Problem Occurred	km (mile)

Symptoms	☐ Cancel occurs while driving with cruise control	● Driving condition ☐ Urban road ☐ Freeway ☐ Uphill ☐ Downhill ● Is it possible to restart cruise control? ☐ Yes ☐ No
	☐ Unable to cancel cruise control	☐ Depressing brake pedal ☐ Shifting into any position except D ☐ Pushing cruise control main switch to CANCEL
	☐ Cruise control malfunction	☐ No acceleration ☐ No deceleration ☐ Hunting occurs ☐ No downshift ☐ No upshift after downshift
	☐ Cruise control main switch malfunction	☐ SET ☐ + ☐ – ☐ RES ☐ CANCEL
	☐ CRUISE main indicator light malfunction	☐ Remains on ☐ Does not come on ☐ Blinks

DTC check	First Time	☐ Normal System Code ☐ Trouble Code (Code)
	Second Time	☐ Normal System Code ☐ Trouble Code (Code)