

# CUSTOMER PROBLEM ANALYSIS CHECK

**KEY REMINDER WARNING SYSTEM Check Sheet**

Inspector's name: \_\_\_\_\_

Customer's Name	_____	VIN	_____
		Production Date	/ /
		License Plate No.	_____
Date Vehicle Brought In	/ /	Odometer Reading	_____ km miles

Date Problem First Occurred	/ /
Frequency Problem Occurs	<input type="checkbox"/> Constant <input type="checkbox"/> Intermittent (    times a day) <input type="checkbox"/> Only once
Weather Conditions When Problem Occurred	<b>Weather</b> <input type="checkbox"/> Fine <input type="checkbox"/> Cloudy <input type="checkbox"/> Rainy <input type="checkbox"/> Snowy <input type="checkbox"/> Various/Others
	<b>Outdoor Temperature</b> <input type="checkbox"/> Hot <input type="checkbox"/> Warm <input type="checkbox"/> Cool <input type="checkbox"/> Cold (Approx. °C ( °F))

Problem Symptoms	<input type="checkbox"/> Key reminder buzzer does not sound
	<input type="checkbox"/> Other