

Radio Part Restriction Questionnaire

		DATA RESPONSES					
Section A - Basic order information:							
1	DATE:						
2	Dealer Name:						
3	Dealer Code:						
4	Delivery Date:						
5	VIN#						
6	RO #						
7	Odometer:						
8	Part Number						
9	Ordered By:						
10	ESC RA#:						
11	Service Tech Name:						
12	Service Tech Phone Number						
13	TAC case number (if applicable)						
14	Type problem:	CD Player	Radio reception	Sound Quality / Speakers	Display / Clock Problems	Controls / Buttons / Knobs	Other
Section B - Problem Description (must complete for all issues):							
1	Customer complaint (give specific details):						
2	Identify diagnostic methods used	Service Manual	Tech 2	TAC	Other		
3	Is the problem constant or intermittent	constant	Intermittent				
4	Was problem duplicated and / or verified?	Yes	No				
5	Does the problem occur (check all that apply)	With engine off	immediately after starting	after driving a short time	After driving a long time		
6	Are there any aftermarket electrical devices (remote start, amplifier, speakers, navigation systems, DVD players, lights, etc.) installed on vehicle:	Yes	No				

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	if known please give device type and brand name:						
7	Was there physical damage to the radio?	Yes	No				
8	Any previous electrical / electronic issues with the vehicle?	Yes	No				
	if yes, describe:						
9	Was this problem the only reason the vehicle was brought in for service?	Yes	No				
	if no, describe other problem:	Text					
Section C - CD Player Problems (to be completed only if problem is related to the CD player (ref 14-1)):							
1	Does the CD player accept / load a CD?	Yes	No	Unknown			
2	Does the CD player play the CD?	Yes	No	Unknown			
3	Does the CD player skip/jump?	Yes	No	Unknown			
4	Does the CD player eject the CD when eject button pushed?	Yes	No	Unknown			
5	Are there CDs stuck in the player now? If so how many?	No	1	2	3	4	5 6
6	If CD ejects, describe the general condition of the CD(s).	Excellent	Good	Poor	Bad		
7	Does problem occur with one or more than one CD?	One	More	Unknown			
8	What type media was being used at time of the incident(s)	Homemade	Commercial Music	Commercial Books on CD	Unknown		
9	Was there an error message on the radio associated with the event?	Yes	No	Unknown			
	If yes, describe error message:						
10	Did the clock reset to 12:00 after the incident?	Yes	No	Unknown			
11	Are there any unusual sounds heard when problem occurs?	Yes	No				
	If yes, describe:	Grinding	Ticking	Cracking	Other		
12	Typically, when you touch a CD after it is ejected, it is:	Cool	Warm	Hot	Very Hot	Unknown	
Section D - Radio Reception (to be completed only if problem is related to radio reception (ref 14-2)):							
1	On which radio band(s) was the problem noted:	AM	FM	XM	All Bands		
2	Describe the reception	Distorted	Static	Too Loud	Too soft / weak	Fades in/out	Other
3	On what station or channel is the problem most noticeable						

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4	Were there other electronic or electrical devices (cell phone, battery chargers, Laptops, etc) plugged in or being used at the time of the incident(s)?	Yes	No	Unknown			
	If yes, describe:						
5	Were all antenna connections verified to be in place and secure?	Yes	No	Unknown			
Section E - Sound Quality / Speakers (to be completed only if problem is related sound quality and/or speakers (ref 14-3)):							
1	Describe the complaint:	No Audio	Distorted	High Volume Level	Low Volume Level	Intermittent	
2	On what radio mode does the complaint occur:	AM	FM	XM	CD	TAPE	ALL
3	Which audio channels are affected:	Left Front	Right Front	Left Rear	Right Rear	ALL	
Section F - Display / Clock Problems (to be completed only if problem is related to the display or the clock (ref 14-4)):							
1	Was there an error message on the radio associated with the event?	Yes	No	Unknown			
	If yes, describe error message:						
2	Did the clock reset to 12:00 after the incident?	Yes	No	Unknown			
3	Which part of the display was impacted by the problem?	Total display	Top Line	Bottom Line	Both Lines		
4	When the problem occurs the faceplate is:	Cool	Warm	Hot	Very Hot	Unknown	
5	Does the problem occur:	Daytime	Night time	Both			
Section G - Controls/Buttons/Knobs (to be completed only if problem is related to the buttons, knobs or controls (ref 14-5)):							
1	Does the vehicle have steering wheel controls?	Yes	No	Unknown			
2	Specify which buttons or controls.						
3	What radio or steering wheel control function was being performed when the incident occurred?	Changing Source	Changing CD	Changing Vol	Changing Station	Changing Set up	other