

# CUSTOMER PROBLEM ANALYSIS CHECK

## RSE SYSTEM Check Sheet

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

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

Date of First Occurrence	/ /
Frequency of Problem Occurrence	<input type="checkbox"/> Constant <input type="checkbox"/> Intermittent (    Times a day)

Problem Symptom	<input type="checkbox"/> Switch & Volume Assy
	<input type="checkbox"/> Headphone
	<input type="checkbox"/> Multi-display Controller Sub-assy
	<input type="checkbox"/> Disc Player Controller (Built in "Television Display Assy")
	<input type="checkbox"/> Television Display Assy

DTC Check	Parts name	DTC (1st time)	DTC (2nd time)
	Multi-display Controller Sub-assy		
	Disc Player Controller		
	Television Display Assy		