Name_____

Fluids, Filters, Belts, Hoses & Batteries Lab Sheet

	vehicle #1		vehicle #2		vehicle #3	
Fluids:	*Fluid level*	*How did you check this?*	*Fluid level*	*How did you check this?*	*Fluid level*	*How did you check this?*
Engine oil						
Type of oil recommended						
Coolant						
Power steering fluid						
Brake fluid						
Transmission fluid						
Washer fluid						
Other fluids:						

	Condition	*Where is it located?*	*Condition*	*Where is it located?*	*Condition*	*Where is it located?*
Filters:						
air filter						

	# of belts	*Condition*	*# of belts*	*Condition*	*# of belts*	*Condition*
Belts:						
Drive belts						
Timing belt						

	Condition	*Location*	*Condition*	*Location*	*Condition*	*Location*
Hoses:						
Upper radiator hose						
Lower radiator hose						
Heater hoses						

	conditon	*condition*	*condition*
CV axles:			
Left CV boots			
Right CV boots			

	conditon	*condition*	*condition*
Battery:			
visual terminal condition			

Other items that need attention:			