

ALIGNMENT SYMPTOM SHEET

Check All That Apply

DOES THE VEHICLE DRIFT OR PULL?

- Yes Right Left
 No
 When braking
 All the time

DOES THE VEHICLE WANDER?

- Yes
 No

DO YOU FEEL ANY VIBRATION?

- Yes If so, at what speed? _____ MPH At all speeds
 No

ARE THE TIRES WORN IRREGULAR?

- Yes Front Rear
 No

IS THE STEERING WHEEL STRAIGHT WHEN DRIVING STRAIGHT AHEAD?

- Yes
 No

DOES THE STEERING SEEM LOOSE?

- Yes
 No

ANY UNUSUAL NOISES WHEN GOING OVER BUMPS?

- Yes
 No

EXPLAIN IN MORE DETAIL (if needed): _____

