

CDX Tasksheet Number: C304

Time off _____

Time on _____

Total time _____

1. Research the maintaining or restoring of electronic memory functions for this vehicle in the appropriate service information. Please follow all directions, and note that some vehicle electronic devices REQUIRE specific codes for reinitialization. If you don't have those codes available, do NOT disconnect the battery

NOTE Some manufacturers require the use of tools that help maintain memories, such as radios, adaptive strategies, etc. The use of these tools can minimize down time in restoring electronic memories lost when a battery is disconnected. In some cases, the use of a "memory minder," which is basically a battery that plugs into the 12V accessory socket or the data link connector, can be utilized. In all cases, follow the manufacturer's instructions.

2. Restore electronic memory functions.
 - a. **Change the vehicle's radio pre-set frequencies of the FM (1) stations and list those resets here:**
1. _____ 2. _____ 3. _____ 4. _____
 - b. With NO memory minder installed, disconnect the negative battery terminal for at least 15 seconds.
 - c. Reconnect the negative battery terminal, and tighten properly.
 - d. **Check the radio pre-sets. Did they change? Yes: _____**
No: _____
 - i. **Why or why not?**
 - f. Restore the frequencies, as per manufacturer recommendations, to the stations noted in step 2a.
 - g. **What would you have to do to restore the vehicle's PCM adaptive learning memory if it is erased?**
3. Maintain the electronic memory functions
 - a. Reset the radio pre-sets to the same stations you did before.
 - b. Install a memory minder to maintain electrical power in the system.

- c. Disconnect the negative battery terminal for at least 1 minute.
- d. Check the radio pre-sets. Did they change? Yes: _____ No: _____
 - i. Why or why not?

- e. Under this scenario, what happens to the vehicle's PCM adaptive learning memory if the battery is disconnected?

4. What did you learn?

- 5. Have your supervisor/instructor verify satisfactory completion of this procedure, any observations found, and any necessary action(s) recommended.

Performance Rating

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1

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3

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Supervisor/instructor signature _____ Date _____