

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation
National Highway Traffic Safety Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.
CORRECT MARK: ●

Date Received: 10-27-02
Reference No.:
Odor:
red:
ad-it:
up-ir:

CITY
CORONA

STATE
CA

ENTER ZIP CODE

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?

Yes
No

In the presence of the vehicle manufacturer.

SIGN

DATE

10/03/02

VEHICLE IDENT. NO. (VIN) 1GCCS19X618184169 VEHICLE MAKE CHEV. TRK. VEHICLE MODEL S10 MANUFACTURE DATE 1997 MODEL YEAR 1997

VEHICLE MANUFACTURER

☐ BMW ☐ Ford ☐ Honda ☐ Nissan ☐ Subaru ☐ Volvo ☐ Other
☐ Daimler/Chrysler ☒ General Motors ☐ Hyundai ☐ Saab ☐ Toyota ☐ VW

PURCHASE DATE

4-27-97

☒ New
☐ Used

DEALER'S NAME

CORONA CHEVROLET CORONA

CITY

CORONA

STATE

CA

ZIP CODE

ENGINE SIZE

(CID/CC/L)

NO. CYLINDERS

6

FUEL SYSTEM

☐ Turbo☒ Fuel Injection

FUEL TYPE

☐ Diesel☒ Gas

TRANSMISSION TYPE

☒ Manual☐ Automatic

ANTILOCK BRAKES

☒ Yes☐ No

RESTRAINT SYSTEM

☐ Driveline Airbag☐ Passengerside Airbag☐ 3-Point Belt☒ 2-Point Belt☐ Motorbelt

CRUISE CONTROL

☐ Yes☒ No

DRIVETRAIN

☐ Front☒ Rear☐ 4-Wheel

VEHICLE TYPE

☐ Car☐ Van☐ Minivan☐ Sport Utility☒ Truck☐ Motorcycle☐ Other

DOORS

☒ 2-Door☐ 4-Door

BODY STYLE

☐ Hatchback☒ Pick Up Truck☐ Sedan☐ Stationwagon

COMPONENT

☐ Child Seat
☐ Electrical Lights & Alarms
☐ Engine & Cooling System
☐ Equipment
☐ Fuel System, Exhaust
☐ Heater, Defrost, Ventilation
☐ Interior
☐ Parking Brakes
☐ Power Train
☐ Service Brakes
☐ Steering
☐ Structure
☐ Suspension
☐ Visual Systems
☒ Other

UNION AND
CARRIER
BEARINGS

NO. OF FAILURES

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

INCIDENT DATE

9-18-02

MILEAGE AT INCIDENT

13,465

VEHICLE SPEED AT INCIDENT

N/A

FAILED PART(S)

☒ Original☐ Replacement

FAILED PART(S) AVAILABLE?

☒ Yes☐ No

To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME

COMPLETE TIRE SIZE

TIRE BRAND

☐ BF Goodrich
☐ Cooper
☐ Firestone
☐ Goodyear
☐ Kelly Springfield
☐ Michelin
☐ Yokohama
☐ Other

NHTSA PREVIOUSLY CONTACTED?

☐ Yes☐ No

HANDICAPPED ADAPTIVE

☐ Yes☒ No

Please describe in detail the incident(s), failure(s), crash(es), and injury(es) on the back of this form.

CRASH

☐ Yes☒ No

NUMBER OF PERSONS INJURED

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

FIRE

☐ Yes☒ No

NUMBER OF FATALITIES

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

CAUSE OF INCIDENT

☐ Wear/Corroded/Rust
☐ Weak/Poor Fit/Loose
☐ Cut/Torn
☐ Disconnect/Fall Off
☐ Erratic/Poor Performance
☐ Excessive Effort
☒ Noise
☐ Leaks
☐ Short
☐ Locks/Sticks/Grabs
☐ Stability/Vibration
☒ Broken

RESULT OF INCIDENT

☐ Explosion/Fire
☐ Loss of Control
☐ Poor Visibility
☐ Inadvertent Start
☐ Rollover
☐ Stalls
☐ Sudden Acceleration

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

COPY OF OIL CAN HENRY'S
WHO DID OIL CHANGE &
CHECKED DIFFERENTIAL ON MY
REQUEST. SAID ORIGINAL SEAL
HAD NOT BEEN BROKEN, SHOWED
ME OIL WITH BITS OF METAL.
TOOK TRUCK TO CORONA CHEV.
& TOLD THEM ABOUT IT AND
NOISE THAT HAD BEEN GOING
ON FOR 4 DAYS, AND METAL
BITS IN DIFF. OIL.

SEE LETTER, COPIES
AND PICTURES
ENCLOSED.

Continue on additional page if necessary.

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974—Public Law 92-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTBA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mark Reflex® by NCS EYE-228239-1-554321 HP/08 Printed in U.S.A.
© Copyright 1989 by National Computer Systems, Inc. All rights reserved.
HS Form 350 (Rev. 8/88)

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



VEHICLE
OWNER

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration

www.nhtsa.dot.gov/hotline

Complete and return or place in your car manual for future use