



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

Date Received: 2003 MAR 27 2003 2:35
Repository:
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OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: RIPON State: WI Zip Code: [Redacted]

Daytime Telephone Number: 920-748-6833
E-mail Address:
Evening Telephone Number:

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: _____ Date: 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver side: 1GMDT13W8VK246036
Make: CHEVROLET Model: BLAZER Model Year: 1998
Date Purchased: 01-JUL-01 Dealer's Name and Telephone Number: Ven Dynhoven Imports
Engine: 4.3 No. Cylinders: 6 Fuel Type: Gas
Original Owner: Dealer's City: Appleton State: WI Zip Code: 54914
Transmission Type: [] Antilock Brakes: Powertrain: [] Cruise Control:
Vehicle Component Code: 137200 VISIBILITY: REAR WINDOW WIPER/WASHER: MOTOR
Multiple Failure: []

windshield wipers

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): Any time it rains.
Failure Mileage:
Failure Speed:
Wind Shield Wipers upper/lower ball joints & IDler arm cap rotor and coil wire

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: _____ Tire Model (Name or Number): _____ Tire Size (Example P215/65R15): _____
DOT No. (Example: DOTM19ABC036): _____ Original Equipment Prior Repair: Failure Location: _____
Tire Component Code: _____ Tire Failure Type: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: _____ Date Manufactured: _____ Model No./Name: _____
Seat Type: _____ Installation System: _____
Child Seat Component Code: _____ Failed Part: _____

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: _____ Number of Deaths: _____ Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

CONSUMER CALLED COMPLAINING ABOUT HAVING PROBLEM WITH THE WIPER STOPPING INTERMEDIATELY. ALSO STATED THAT HAS CONTACTED THE DEALER AND THERE IS NO RECALLS ON THE PARTS. PH Windshield wiper stop working while driving causing visibility to be poor!!
On 8-1-02 had to replace upper & lower ball joints & IDler arm.
11-6-02 Had to replace cap, rotor & coil wire. Rotor was burnt.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-579) 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 NHTSA 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.