



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 100079

Date Received: 02 FEB 2003

Repository ☐

Reference No.
10004294

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: ANGLETON State: TX Zip Code: [REDACTED]

OFFICE

Daytime Telephone Number: [REDACTED]

Evening Telephone Number: [REDACTED]

Email Address: [REDACTED]

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: [REDACTED] Date: 02 FEB 2003

VEHICLE INFORMATION

VIN: 1GNEC17D1137712		Make: CHEVROLET	Model: TAHOE	Model Year: 2001
Date Purchased: 01/01	Dealer's Name and Telephone Number: Les Martin 979-230-2500		Engine: 5300	Fuel Type: Gas
Original Owner: ☐	Dealer's City: [REDACTED]	State: [REDACTED]	Zip Code: [REDACTED]	
Transmission Type: Auto	☒ Antilock Brakes	Powertrain: 2WD	Vehicle Component Code: 150000 SEAT BELTS	
	☒ Cruise Control		Multiple Failure: [REDACTED]	

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 21-JAN-2003	Failure Mileage: 40,000	Failure Speed: NA
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED]	Tire Model (Name or Number): [REDACTED]	Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM15ABC036): [REDACTED]	☐ Original Equipment ☐ Prior Repair	Failure Location: [REDACTED]
Tire Component Code: [REDACTED]		Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

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: 0	Number of Deaths: 0	Reported to Police: N
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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).

NHTSA#01-V-159-000: RETRACTORS FOR THE 2ND AND 3RD ROW OF SEATS THAT COULD BE CRACKED. CONSUMER HAS THE SAME PROBLEM. THIS VEHICLE WAS NOT INCLUDE IN THE RECALL DUE TO THE VIN#. DEALER NOTIFIED. PH

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.