



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 100147

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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: CORDOVA State: TN Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]
Evening Telephone Number: [REDACTED]
E-mail 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 your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 3/2/03

| | | | |
|--|-------------------------------------|---|------------------------|
| Make: GMC | | Model: JIMMY | Model Year: 1996 |
| Date Purchased: | Dealer's Name and Telephone Number: | | Engine: No: Cylinders: |
| Original Owner: <input type="checkbox"/> | Dealer's City: | State: | Zip Code: |
| Transmission Type: <input type="checkbox"/> Automatic Brakes <input type="checkbox"/> Cruise Control | Powertrain: | Vehicle Component Code: 138130 VISIBILITY: DEFROSTER/DEFOGGER SYSTEM: WINDSHIELD: C | |
| Multiple Failure: | | | |

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 15-APR-2002
Failure Mileage: [REDACTED]
Failure Speed: [REDACTED]

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: DOTM4LSABC036): | <input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair | Failure Location: |
| Tire Component Code: | The 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: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).

WHILE DRIVING AND WITH NO WARNING WINDSHIELD WIPER WILL WORK INTERMITTENTLY, AND IT WILL BE HARD FOR THE CONSUMER TO SEE DURING RAINY WEATHER. DEALER NOTIFIED.*AK

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 responses 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.

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

wipers stop working in any setting (intermittent, low, fast)
switching wipers on/off to get them to wipe again.
If this doesn't turn on wipers - driver must pull over
more wiper by hand to start wipers up again.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 79179 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, NVS-216
400 7th Street, SW
Washington, DC 20590



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



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