



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: 2003 MAR 11 7:34 PM  
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**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: SPARTANBURG State: SC Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] 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's side): 3GKFK6T21G277603  
Make: GMC Model: YUKON Model Year: 2001  
Date Purchased: 11/7/01 Dealer's Name and Telephone Number: WAKEFIELD BUICK 864-562-4555 Engine: No. Cylinders: 8 Fuel Type: Regular  
Original Owner:  Dealer's City: SPARTANBURG State: SC Zip Code: 29301  
Transmission Type:  Antilock Brakes  Cruise Control Powertrain: \_\_\_\_\_  
Vehicle Component Code: 151400 SEAT BELTS:FRONT:BUCKLE ASSEMBLY  
Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 11-FEB-2003 Failure Mileage: \_\_\_\_\_ Failure Speed: \_\_\_\_\_

**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).

THERE WAS NO FLEXIBILITY WHEN THE LATCH BELT WAS FASTENED. \*JB

*This is a design issue with the passenger side front seat belt. When you latch this belt it locks in permanently so that you are unable to lean forward to use the radio, CD, tape or to pick up something on the floor. You then must unlatch the seat belt to do these things creating an unbelted situation. Drivers side does not do this. I believe this may be to insure a child seat is held in.*

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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.