



DOT Auto Safety Hotline

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

**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

Date Received

31-MAR-2003

Repository

Reference No.  
10014814

2003 MAY -1

E-mail Address

**OWNER INFORMATION (Type or Print)**

Name

Address

City

TEXARKANA

State

TX

Zip Code

Daytime Telephone Number

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 use reasonable means to identify the manufacturer.

Signature of Owner

Date 4/18/03

**VEHICLE INFORMATION**



Make

CHEVROLET

Model

BLAZER

Model Year

2001

Date Purchased

12-11-00

Dealer's Name and Telephone Number

ORR CHEVROLET

Engine: 4, 3

No: Cylinders 4/6

Fuel Type:

Gasoline

Original Owner

Dealer's City

TEXARKANA

State

TX

Zip Code

75505

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

030000 SERVICE BRAKES, HYDRAULIC

Multiple Failure: 1

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

Incident Date(s)

28-MAR-2003

Failure Mileage

22,251

22,253

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: DOTM15ABC036)

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).

WHEN THE BRAKE WAS APPLIED, THE VEHICLE EXPERIENCED EXTENDED STOPPING DISTANCE. \*JB

*They faked up the tires. Approx. 1 car length to stop from where vehicle should have already stopped. They replaced all things to brakes they are still sponging to the floor, master cylinder changed. 7 times last on Eng an Engineer w/SM, they still have vehicle, going to work a deal for me another one, since I complained to the better B.B. List attached parts replaced. Most of my receipts*

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.

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

April 19, 03 they are writing on parts that are going to replace Brake (exactly) Calipers & others to see if that fixes it.

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 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, 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) 2 DOT



U.S. Department of Transportation  
National Highway Traffic Safety Administration  
<http://www.nhtsa.dot.gov/ohvs>

Central Office  
Chevrolet Motor Division  
General Motors Corporation  
100 Renaissance Center, P.O. Box 100, Detroit, MI 48265-1000



C-01073-S  
August, 2002

Dear Chevrolet Customer:

*Aug 2002*

This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.

**Reason For This Recall:** General Motors has decided that a defect that relates to motor vehicle safety exists in certain 2000 and 2001 Chevrolet Blazers, TrailBlazers, and 2002 Blazers. The multifunction switch may develop an open circuit condition with the bottom contact in the hazard switch carrier that results in the stop lamps and hazard lamps becoming inoperative. The center high mounted stop lamp and turn signal functions are not affected. The loss of stop lamps and rear hazard lamps could fail to warn a following driver that the vehicle is braking and/or is stopped and could lead to a vehicle accident.

**What Will Be Done:** Your Chevrolet dealer will replace the hazard switch carrier. This service will be performed for you at no charge.

**How Long Will The Repair Take?** The length of time required to perform this service correction is approximately 40 to 55 minutes. Additional time may be required to schedule and process your vehicle. If your dealer has a large number of vehicles awaiting service, this additional time may be significant. Please ask your dealer if you wish to know how much additional time will be needed to schedule, process and repair your vehicle.

**Contacting Your Dealer:** Please contact your Chevrolet dealer as soon as possible to arrange a service date. Parts are available and instructions for making this correction have been sent to your dealer. Your dealer is best equipped to obtain parts and provide services to correct your vehicle as promptly as possible. Should your dealer be unable to schedule a service date within a reasonable time, you should contact the Chevrolet Customer Assistance Center at 1-800-222-1020. The deaf, hearing impaired, or speech impaired should call 1-800-833-2438 (utilizes Telecommunication Devices for the Deaf/Text Telephones, TDD/TTY).

If, after contacting the Chevrolet Customer Assistance Center, you are still not satisfied that we have done our best to remedy this condition without charge and within a reasonable time, you may wish to write the Administrator, National Highway Traffic Safety Administration, 400 Seventh Street, SW, Washington, DC 20590 or call 1-888-327-4236.



GM OWNER: Present this card to your GM dealer to help identify the correction required to your vehicle.  
PLEASE CHECK (X) THE APPROPRIATE BOX IF ANY OF THE CONDITIONS LISTED BELOW ARE APPLICABLE.  
SUPPLY THE INFORMATION REQUESTED AND RETURN IN THE ENVELOPE PROVIDED.

- I have never owned this vehicle
- Vehicle damaged beyond repair
- Vehicle stolen and not recovered
- Campaign Completed on Date \_\_\_/\_\_\_/\_\_\_ by  Self  Other  Vehicle Sold/Traded/Returned to:

00000114271  
01073 1GNCS13W312183291 C-1S

████████████████████  
████████████████████  
TEXARKANA, TX

NEW OWNER/FIRM NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
 (AREA CODE) PHONE NUMBER \_\_\_\_\_  
 OWNER SIGNATURE \_\_\_\_\_

**Customer Reply Card:** The attached customer reply card identifies your vehicle. Presentation of this card to your dealer will assist in making the necessary correction in the shortest possible time. If you no longer own this vehicle, please let us know by completing the attached and mailing it in the postage paid envelope.

**Reimbursement:** (Statement for all states except as shown below) If you have already paid for some or all of the cost to have your multifunction switch replaced, and you have not received reimbursement under a Vehicle Service Contract, you should contact your dealer to seek reimbursement. Please provide your dealer with your original paid receipts or invoices verifying the repair, the amount charged, proof of payment, the date of payment of those charges, and proof of ownership of the vehicle at the time of the repair. Your request for reimbursement, including the information and documents mentioned above, must be received by your dealer by April 30, 2003.

(Statement for California, Connecticut, Virginia, and Wisconsin)

If you have already paid for some or all of the cost to have your multifunction switch replaced, and you have not received reimbursement under a Vehicle Service Contract, you should write to Chevrolet Motor Division, P.O. Box 33170, Detroit, MI 48232-5170 to seek reimbursement. Please provide your original paid receipts or invoices verifying the repair, the amount charged, proof of payment, the date of payment of those charges and proof of ownership of the vehicle at the time of the repair. This information must be provided within two (2) years after the date on which you paid for the repair.

We are sorry to cause you this inconvenience; however, we have taken this action in the interest of your safety and continued satisfaction with our products.

Chevrolet Motor Division  
General Motors Corporation

Enclosure



010731GNCS13W312183291

**THE ATTACHMENTS TO THIS  
DOCUMENT HAVE BEEN REMOVED  
TO PROTECT UNWARRANTED  
INVASION OF PERSONAL PRIVACY  
PURSUANT TO EXEMPTION 6 OF  
THE FREEDOM OF INFORMATION  
ACT (FOIA), 5 U.S.C. 552(b)(6).**