



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 1367

Date Received

02-APR-2003

Repository

Reference No. 10015042

2003 APR 11 9:47

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City APPLETON State WI Zip Code _____

Daytime Telephone Number _____

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 6/27/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GAGG25R2W1053193
Make CHEVROLET Model EXPRESS Model Year 1998
Date Purchased SEPTEMBER 2000 Dealer's Name and Telephone Number BRENNAN BUICK
Engine: No. Cylinders 8 Fuel Type: Gas
Original Owner Dealer's City GREEN BAY State WI Zip Code _____
Transmission Type AUTO Antilock Brakes Cruise Control Powertrain 5.7 L V8
Vehicle Component Code 162310 STRUCTURE:BODY:DOOR:HINGE AND ATTACHMENTS
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 02-SEP-2000 Failure Mileage 80000 Failure Speed N/A

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), cause(s), 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).

THE DOOR HINGES FROZE UP AFTER A PERIOD TIME. THE CONSUMER HAD TO USE EXCESSIVE FORCE TO CLOSE DOOR. *JB
IN ADDITION, THE DOORS HAVE BECOME MIS-ALIGNED CAUSING A GAP BETWEEN THE 2 SIDE DOORS, NOW THAT THE FRAMEWORK OF THE DOOR (WHICH THE HINGES ARE MOUNTED TO) HAS GOTTEN DEFORMED. SERIOUS SAFETY CONCERNS HAVE RESULTED, IN WHICH IT HAS REQUIRED THE MANDATORY USE OF THE CHILD SAFETY LOCK ON THE SIDE DOORS.

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 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 responses, or a statistical summary thereof, may be used in support of the agency's action.