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

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FOR AGENCY USE ONLY 1367	
Date Received 22-MAY-2003	Repository ☐
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OWNER INFORMATION (Type or Print)

Name	[redacted]
Address	[redacted]
City MISHAWAKA	State IN
Zip Code	[redacted]
Daytime Telephone Number	[redacted]
Evening Telephone Number	
E-mail Address	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an [redacted] *your name or address to the vehicle manufacturer.*

Signature of Owner [redacted] Date __/__/__

VEHICLE INFORMATION

[redacted]	Make CHEVROLET	Model SILVERADO	Model Year 2001
Date Purchased 1-01	Dealer's Name and Telephone Number Gates Chevrolet	Engine: 4.3	Fuel Type:
Original Owner ☒	Dealer's City Mishawaka	State In	Zip Code 46544
No. Cylinders 6			
Transmission Type Auto	☒ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code 030000 SERVICE BRAKES, HYDRAULIC
Multiple Failure: +			

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
	4600	avg. 40 [illegible]	Brakes fail - Seems consistent when hitting brakes and bump - ABS fail and manual brakes [illegible]

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 BRAKES DID NOT HOLD WHEN THEY WERE PRESSED WHILE DRIVING OVER A BUMP. *NLM

Seems A.B.S. overrides brakes for skid (when you not) then it doesn't activate - Gates upon one time Jan. 03, checked with portable computer on drive and said front dr. sensor showed spiking - Brakes skid - while we were just driving. Didn't even have brakes applied! Didn't document said would order part and for back sensor. Four weeks later couldn't (Gates) remember it. From 01 - 03 has been in garage 12 X's - They didn't document most of it.

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