



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

Repository

2003 JUL 17 3 AM 10 26

Reference No.
10022958

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: HAYWARD State: WI Zip Code: [REDACTED]

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?
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

YES NO

Signature of Owner: [REDACTED] Date: 06/23/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G1ND52MXX101199
Make: CHEVROLET Model: MALIBU Model Year: 1999
Date Purchased: 08-00 Dealer's Name and Telephone Number: [REDACTED] Engine No: Cylinders: 6 Fuel Type: [REDACTED]
Original Owner: Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]
Transmission Type: [REDACTED] Antilock Brakes Cruise Control Powertrain: [REDACTED] Vehicle Component Code: 021210 SUSPENSION:FRONT:SPRINGS:COIL SPRINGS
Multiple Failure: 1

FAILED COMPONENT(S) / PART(S) INFORMATION

Incident Date(s): 05/27/03 Failure Mileage: 50000 Failure Speed: REVERSE

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM4LSABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

APPLICABLE INCIDENT INFORMATION

Crash: Yes No Fire: Yes No Number of Persons Injured: 0 Number of Deaths: 0 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 AT A VERY LOW SPEED DRIVER'S SIDE SPRING OVER THE STRUT BROKE. THIS CAUSED THE TIRE TO BLOWOUT. *AK WAS TOLD THAT HAD THIS HAPPENED WHILE ON THE ROAD, HAD NOT IN PARKING LOT, I WOULD HAVE KNOWN UP IN ONCOMING TRAFFIC, WHICH COULD HAVE RESULTED IN SERIOUS INJURY OR DEATH. ALSO HAD TO REPLACE A TIRE THAT ONLY HAD 4,000 MILES, BECAUSE THE SPRING BECAME ANCHORED THE TIRE

COPY OF WORK ORDER ENCLOSED

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 an administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

**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).**