



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 1375

Date Received 2003 JUN 18 AM 2:31	Repository <input type="checkbox"/>
Reference No. 10024125	

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: SOUR LAKE State: TX Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Evening Telephone Number: [REDACTED]

Do you authorize NHTSA, in the absence of an authorized signature, to contact the manufacturer of your vehicle? YES NO
Signature of Owner: [REDACTED] Date: 7/1/03

VEHICLE INFORMATION

Vehicle Identification Number: 1GNEC13T8YJ167590
Make: CHEVROLET Model: TAHOE Model Year: 2000
Date Purchased: 9-12-00 Dealer's Name and Telephone Number: Morris More 409-894-5961
Original Owner: Dealer's City: DUNDRA TX State: TX Zip Code: 77612
Engine: No. Cylinders: 8 Fuel Type: [REDACTED]
Transmission Type: [REDACTED] Antilock Brakes Powertrain: [REDACTED] Cruise Control
Vehicle Component Code: 036100 SERVICE BRAKES, HYDRAULIC:ANTILOCK:CONTROL UNIT/M
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 6-13-03 Failure Mileage: 57000 Failure Speed: 0-55
WOULD NOT STOP RUNNING NO MATTER WHAT SPEED REPAIRED BY TURNER AUTO 832 13284

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: DOTM15ABC036): [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
(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: [REDACTED] Number of Deaths: [REDACTED] Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(es).
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 ANTI-LOCK BRAKES ENGAGED WITHOUT INCIDENT AND WOULD NOT DISENGAGE, EVEN WHEN IGNITION WAS TURNED OFF AND KEY REMOVED. DEALER DIAGNOSED THAT ABS MODULE HAD FAILED. *AK

REPAIRED BY: TURNER AUTOMOTIVE 3040 RUST BEAUMONT TX 77702 [REDACTED] (OWNER)

**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).**