



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](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 231

Date Received

2013 JUN 24 PM 12:32  
25-JUN-2003

Repository

Reference No.  
10024921

**OWNER INFORMATION (Type or Print)**

Name

Address

City

BLK GROVE VILLAGE

State IL

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 1/1

**VEHICLE INFORMATION**

Make

GMC

Model

SAFARI

Model Year

2003

Date Purchased

6-2-03

Dealer's Name and Telephone Number

HELMAN RENTALS GMC Truck/Tractor

Engine:

No. Cylinders

Fuel Type:

Original Owner

420

Dealer's City

Dayton, Mo. 63042

State

Mo

Zip Code

63042

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

162000 STRUCTURE:BODY

Multiple Failure: X3-fits, window pop-

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

Incident Date(s)

Failure Mileage

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: DOTR15ABC036)

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, failure(s), condition, 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).

CONSUMER NOTICED WHEN RAINING /OR GOING THROUGH A CAR WASH REAR OF VEHICLE WOULD HAVE STANDING WATER ON FLOOR. \*AK  
Also on the back panels - when you open door lights do not go on - Side large window when you hit a bump it snaps open - Its been in the shop 4 times in like 5 weeks -  
We are senior citizens and really need your help - We must have a new van so we don't have another stress - We had two strokes already -  
Thank you

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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.



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).