



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 231

Date Received

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Repository

Reference No.
10026771

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City **KNOXVILLE** State **IA** 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 _____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
ES 1GN DK03E420 Make **CHEVROLET** Model **VENTURE** Model Year **2002**

Date Purchased **5-20-03** Dealer's Name and Telephone Number **Bob Brown Chevrolet** Engine: No. Cylinders _____ Fuel Type: _____
Original Owner Dealer's City **Des Moines** State **IA** Zip Code _____

Transmission Type Antilock Brakes Powertrain _____
 Cruise Control Vehicle Component Code: **162310 STRUCTURE:BODY:DOOR:HINGE AND ATTACHMENTS**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **6-15-03** 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: 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), crash(es), 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 STATES CHILD FINGER GOT CAUGHT IN VEHICLE SLIDING DOOR. DOOR RELEASE WOULD NOT RELEASE DOOR. CONSUMER USED CROW BAR TO OPEN DOOR. *AK

Automatic Door would not release from interior or exterior & we could not get my son's fingers out of the door. We had to use a crowbar to get him out. If we had not had access to a crowbar, we would have had to call 911. Accident reported to GM. They filed

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

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to a "who" listed 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 administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

The incident as a product allegation. I requested that the automatic sliding door be replaced with a manual slide door. GM refused to do this saying that "the door was functioning as it was designed." The dealer, Bob Brown Chevrolet, replaced the door for me.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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