



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration


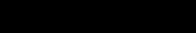

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1368

Date Received
2003 SEP 12 PM 1:44
18-AUG-2003

Repository
Reference No.
10034106

OWNER INFORMATION (Type or Print)


Name 
Address 
City MATTHEWS State IN Zip Code 

Daytime Telephone Number 
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 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
1GN0X13E5C  Make CHEVROLET Model VENTURE Make Year 2003
Date Purchased June 03 Dealer's Name and Telephone Number Carroll Chevrolet Chevrolet 6 Engine: No. Cylinders _____ Fuel Type: _____
Original Owner Dealer's City Madison IN 46952 State IN Zip Code 46952
Transmission Type Antilock Brakes Powertrain _____ Vehicle Component Code 162310 STRUCTURE:BODY:DOOR:HINGE AND ATTACHMENTS
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-AUG-2003 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: D5THALSABC036) 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 1 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, parts repaired or replaced (and if old part is available).

WHEN ENTERING OR EXITING THE VEHICLE THE SLIDING DOOR WOULD AUTOMATICALLY CLOSE, TRAPPING THE CONSUMER, AND CAUSING MINOR INJURIES. DEALER NOTIFIED. *AK



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

The Privacy Act of 1974—Public Law 93-579 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 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)

On July 9th, while on vacation my mother was accidentally shut in
inside causing bruising to her left side. The automatic door
was closing and my mother was getting out of the van. My
father attempted to stop the door using both hands but
the door still hit my mother. I spoke with Pamela
Mason from Detroit and she said we should shut the
door off. Why should I spend thousands of dollars
on a van that all of the parts don't work.
The accident opened my eyes because I have 2
small children that could not stop the automatic door
if they wanted to. When speaking to Pamela she said
she was as high as I could go and they would watch for
Additional Claims. All I want is a van that
doesn't get obviously injured or to a child killed.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department
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National Highway
Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$300

21:4



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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National Highway Traffic Safety
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<http://www.nhtsa.gov>

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COMPLETE THE FORM
ON
DASH2DOT
and dial toll free at
1-888-327-4238
DOT Auto Safety Hotline
(DASH) 2 DOT

**VEHICLE
OWNER'S
QUESTIONNAIRE**
AUTO SAFETY HOTLINE