



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

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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: PALM DESERT State: CA Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] 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 your signature, your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 9/16/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G1BL33K9W102301
Make: CHEVROLET Model: CAPRICE Model Year: 1993
Date Purchased: 4/20/93 Dealer's Name and Telephone Number: HAYWARD CHEVROLET DEALER CLOSED 1995
Original Owner: Dealer's City: HAYWARD, CA. State: CA. Zip Code: [REDACTED] Engine: No. Cylinders: 8 Fuel Type: NONE LEADED
Transmission Type: AUTO Antilock Brakes Cruise Control Powertrain: [REDACTED] Vehicle Component Code: 341000 COMMUNICATIONS:HORN ASSEMBLY
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 6/2003 Failure Mileage: 25000 Failure Speed: [REDACTED]

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: DOTMALSABC036): [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(ies).)

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(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure(s), parts repaired or replaced (and if old part is available).

THE HORN IS INOPERATIVE BECAUSE HOT WEATHER TEMPERATURE MELTED THE MECHANISMS THAT ACTIVATE IT. *AK

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