



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

Repository ☐

11 SEP 2003 2:33 PM

Reference No.
10039736

OWNER INFORMATION (Type or Print)

Name

Address

City

LENNOX

State

SD

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 authorized signature to the vehicle manufacturer.
Signature of Owner _____ Date 11/15/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side)

Make

GMC

Model

SIERRA

Model Year

1994

1G DE 419 W 4 R B 54309

Date Purchased

4-23-95

Dealer's Name and Telephone Number

1-605-334-2010
Billion Sioux Falls, SD

Engine:

No. Cylinders

6

Fuel Type:

gas

Original Owner

☒

Dealer's City

Sioux Falls

State

SD

Zip Code

57039

Transmission Type

☒ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR

Multiple Failure: 1

FAILED COMPONENT(S) / PART(S) INFORMATION

Incident Date(s)

5-25-2000

Failure Mileage

25mi

Failure Speed

25mi

Antilock Brakes Failed

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: DOTM15ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

The Component Code

The 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

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☒ Yes ☐ No

☐ Yes ☒ No

0

0

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 STATED WHILE USING WINDSHIELD WIPERS AND WITHOUT ANY INDICATION WIPERS OPERATED POORLY DUE TO WIPER MOTOR DEFECT. *AK

The windshield wipers quit several times a few times while we were in heavy traffic

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.

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

The brakes failed twice and I went to the Dealer and explained what happened only to get a lot of excuses. It happened both times on ice and sand mixture.

The third time I was on a freshly sanded and snow packed street, I came up behind a vehicle with a plank sticking out the back with a small red flag. I stepped on the brakes, but the brakes did not work. The Dealer brought in a man from Minneapolis who worked on the van for at least 5 hours at which time we were not allowed to go near the van. But that was all we had the accident.

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U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4238

DOT Auto Safety Hotline
(DASH) & DOT



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http://www.nhtsa.dot.gov/defects

**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).**