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 100184

Date Received	Repository ☐
2003 OCT 21 PM	Reference No. 10040413

OWNER INFORMATION (Type or Print)

Name			
Address	[redacted]	Daytime Telephone Number [redacted]	E-mail Address [redacted]
City EAGLE POINT	State OR	Zip Code [redacted]	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 [redacted] name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 10/18/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number (Located at bottom of windshield on driver's side)	Make	Model	Model Year
2GTEK19T0X1521527	GMC	K1500	1999

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
MAY, 2000	WEST OAK			8	GAS
Original Owner ☐	Dealer's City: Klamath Falls	State OR	Zip Code 97601		

Transmission Type		Powertrain	Vehicle Component Code
Automatic	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	038000 SERVICE BRAKES, HYDRAULIC:ANTILOCK
			Multiple Failure: 5

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
12-10-02	52632	65	ABS / ANTI SKID COMPUTER

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: DOTMAL9ABC038)	☐ 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	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).

COMPUTER USED TO CONTROL THE ABS ANTI SKID BRAKES FAILED. VEHICLE HAS ABS BRAKES THAT WERE NOT FUNCTIONING PROPERLY.
*AK G.M. wanted $1,000 to put in a New one, only had 35,000 miles on it. I Know 6 other people with G.M. VEH Any the same part Failed For Them too. Because OF the cost, I unplugged computer, As other people Have Done This part cost Almost 1/10 the cost of the Vehicle.

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