



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 100192

Date Received

Repository

12-NOV-2003

Reference No.

10 PM 3:07

10047831

OWNER INFORMATION (Type or Print)

Name: [Redacted]  
Address: [Redacted]  
City: ELIZABETHTOWN State: KY Zip Code: [Redacted]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to use this report to the manufacturer of your vehicle?  
In the absence of an authorized signature, NHTSA will NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 11/21/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3GNEK1BR7WG144147  
Make: CHEVROLET Model: TAHOE Model Year: 1998  
Date Purchased: 7-98 Dealer's Name and Telephone Number: Herb Jones Chevrolet  
Engine: No. Cylinders: 8 Fuel Type: GAS  
Original Owner:  Dealer's City: ELIZABETHTOWN State: KY Zip Code: 40101  
Transmission Type: Auto.  Antilock Brakes Powertrain: 4wd  
 Cruise Control  
Vehicle Component Code: 015200 STEERING; HYDRAULIC POWER ASSIST; HOSE, PIPING, AND  
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 8-99 Failure Mileage: 88888 13000 Failure Speed: ALL Intermittent

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: The Model (Name or Number): The Size (Example P215/65R15)  
DOT No. (Example: DOTM1A9ABC036)  Original Equipment  Prior Repair Failure Location:  
Tire 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, 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).

VEHICLE IS EXPERIENCING PROBLEMS WITH THE STEERING MECHANISM. SOMETIMES THE VEHICLE LOSES CONTROL OF THE STEERING. THE 2ND ISSUE INVOLVES THE WINDSHIELD WIPERS WHICH WORKS INTERMITTENTLY. PROVIDE FURTHER DETAILS. \*PH

1st Issue: Steering suddenly loses tension and becomes overly sensitive causing erratic control. Removed AND Replaced Steering Wheel Position Sensor. Problem corrected.  
2nd Issue - Windshield wipers Intermittent  
Removed + Replaced the same part in system that was Recalled on 97 and below model Chevrolets. Problem corrected.

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 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 prescribes any administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.