



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 ☐

01 JAN 03 2:05

Reference No.
10048629

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

City

STOCKBRIDGE

State

GA

Zip Code

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 NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 12/01/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1GNDX03E5

Make

CHEVROLET

Model

VENTURE

Model Year

2000

Date Purchased

Nov 29, 01

Dealer's Name and Telephone Number

Bill Heard Chevrolet 770-944-1311

Engine

No: Cylinders

6

Fuel Type:

Unleaded Gas

Original Owner

Dealer's City

Union City

State

GA

Zip Code

Transmission Type

A

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

162300 STRUCTURE:BODY:DOOR

Multiple Failure: 10

For more

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

2/10/03

Failure Mileage

94,000

Failure Speed

25

(Power)

Sliding door

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: DOT149ABC036)

☐ 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

0

Number of Deaths

0

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).

ONE YEAR AGO THE VEHICLE WAS RECALLED (NHTSA CAMPAIGN 03V067000) FOR THE POWER SLIDING DOOR. THE PROBLEM HAS RETURNED AND NOW WHEN THE SLIDING DOOR IS CLOSED IT FAILS TO LATCH AND LOCK PROPERLY. BOTH THE DEALER AND MANUFACTURER WERE CONTACTED. *N/A

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)

On frequent occasions the power sliding door opens on its own. This is a serious matter because I have 5 children ages 9mo to 12yrs of age. The door opens often without notice. On one incident one of my children almost fell out on to the pavement. I have contacted the dealer Bill Heard Chevrolet and Martin Burks Chevrolet located in Union City and Forest Park GA. Both said that I would have to pay to have this problem diagnosed. I also contacted the Customer Assistance Center Chevrolet Division General Motors Corporation Service Request # 1-36997400. But they also did give me any assistance in getting this matter resolved.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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
OR

DASH2DOT

and dial toll free at

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1-888-327-4238

DOT Auto Safety Hotline
(DASH) 2 DOT



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