



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 100147

Date Received

2004-FEB-19
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Repository

Reference No.
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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: RANSONVILLE State: NY Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]

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, please print your name and address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 1/20/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 16CEK19KXR [REDACTED]
Make: CHEVROLET Model: 1500 Model Year: 1994
Date Purchased: MAY 1994 Dealer's Name and Telephone Number: FLANIGAN CHEV. (NO LONGER IN BUS.)
Original Owner: Dealer's City: N. TONAWANDA State: N.Y. Zip Code: 14120
Engine: 5.7L No. Cylinders: 8 Fuel Type: GAS
Transmission Type: AUTO Antilock Brakes Cruise Control Powertrain: 5.7L GAS 4X4
Vehicle Component Code: 136000 VISIBILITY: WINDSHIELD WIPER/WASHER
Multiple Failure: 6

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 15-AUG-2003 Failure Mileage: 62,000 Failure Speed: ANY INTERMITTENT STOPPING & STARTING OF W/S WIPERS WHEN ON.

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: DOTM1GABC036): [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; i.e. parts repaired or replaced (and if old part is available).

WHEN DRIVING IN THE RAIN WINDSHIELD WIPERS FAILED, CAUSING THE DRIVER TO PULL OFF THE ROAD. CONSUMER CONTACTED THE DEALERSHIP ON SIX SEPARATE OCCASIONS, BUT THE PROBLEM RECURRED. *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 Administration 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.