



U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
2008 DASH-2 DOT
(1-888-327-4236)
INTERNET www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100184

Date Received: 2009 FEB 27 AM 10:00
Reference No. 10054143

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: CHAPEL HILL State: NC 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 NHTSA agent, you may provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 1/21/09

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GCEK14R4V [Redacted]
Make: CHEVROLET Model: SILVERADO Model Year: 1997
Date Purchased: 12/06 Dealer's Name and Telephone Number: Weiland Chevrolet
Original Owner: Dealer's City: P. Hsboro. State: NC Zip Code: 27312 Engine No./Cylinders: 8 Fuel Type: Gasoline
Transmission Type: Automatic Antilock Brakes Cruise Control Powertrain: 4 WD
Vehicle Component Code: 015300 STEERING:HYDRAULIC POWER ASSIST:POWER STEERING F
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 29 Jul 2008, April 2009 Failure Mileage: 51,000, 57,500 Failure Speed: Below 40 mph
Description: Power steering (see below)

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/66R15): [Redacted]
DOT No. (Example: DOTM4SABC036): [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: 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).

WHILE DRIVING AT ANY SPEED, AND A LEFT TURN WAS MADE, THE POWER STEERING WENT OUT. *JB

On three occasions, when slowing to a stop and turning left, power steering was difficult. Upon straightening to drive forward, power steering overcompensated to the right.

Include, if available, Police/Fire Department Report, Photos, and Repair Invoice. 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 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.