



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 335

Date Received: 2/10/04  
15 JAN 2004  
Repository   
Reference No.: 10054182

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: TAMPA State: FL Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address:  
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 authorization, NHTSA will not provide your name or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 2/2/04

**VEHICLE INFORMATION**

VIN: 3GNFK16Z6 [Redacted] Make: CHEVROLET Model: SUBURBAN Model Year: 2003  
Date Purchased: 9-11-02 Dealer's Name and Telephone Number: Shakopee Chas, Shakopee 952-445-5200  
Original Owner: [Redacted] Dealer's City: Shakopee MN State: MN Zip Code: [Redacted]  
Engine: V8 No. Cylinders: 8 Fuel Type: Reg  
Transmission Type: 4spd auto Antilock Brakes: [checked] Powertrain: 4 WD MIVE  
Vehicle Component Code: 140000 AIR BAGS Multiple Failures: 21

**FAILURE CONDITION(S)/PART(S) INFORMATION**

Incident Date(s): 9-11-02 Failure Mileage: less than 1000 Failure Code: 65  
Repair was prompt by dealer (W.H. Ho, Chas, Tampa) but weeks more longest duration of air bag warning

**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: DOTM19ABC036)  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(es).)  
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).

THE DEALER HAS MADE 21 ATTEMPTS TO REPAIR THE AIRBAG, HOWEVER THE LIGHT CONTINUED TO ILLUMINATE. \*JB

INCIDENT DATE(S) FAILURE MILEAGE FAILURE CODE  
VEHICLE COMPONENT CODE(S) FAILURE LOCATION

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

**Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)**

Result of replacing steering wheel airbag was that horn ceased working.  
General Motors has agreed to replace the vehicle for a mileage fee  
(\$5000) plus difference in MSRP to a 2004 Suburban.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department  
of Transportation

National Highway  
Traffic Safety  
Administration

400 Seventh St., S.W.  
Washington, D.C. 20590

Official Business  
Penalty for Private Use \$300



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 79175 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY MAIL, HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NYS-216  
400 7th Street, SW  
Washington, DC 20590



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OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
ON

**DASH2DOT**

and dial toll free at

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**1-888-327-4236**

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(DASH) & DOT



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http://www.safercar.gov