



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 100145

Date Received

Repository ☐

2004 APR -1 11:27
26-FEB-2004

Reference No.

10059862

OWNER INFORMATION (Type or Print)

Name

Address

City

ROCHESTER

State

PA

Zip Code

Daytime Telephone Number

E-mail Address

Do you authorize NHTSA to provide your report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of _____ provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 3/30/04

VEHICLE INFORMATION

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

Make

GMC

Model

SIERRA

Model Year

2002

2GTEK19T221254528

Date Purchased

10-28-2001

Dealer's Name and Telephone Number

Norwinstar GMC

Engine

No. Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

Zelienople

State

PA

Zip Code

8

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

182510 STRUCTURE:BODY:TAILGATE:HINGE AND ATTACHMENTS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

26-JAN-2004

Failure Mileage

40000

Failure Speed

0

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: DOTM16ABC036)

☐ 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

0

Number of Deaths

0

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(es).

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 OPENING THE TAILGATE TWO SUPPORT BRACKETS BROKE. AS A RESULT, THE TAILGATE FELL TO THE GROUND. *AK

Both supports were replaced. We have the broken cables.

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.