



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

004 APR - 1 11:11:10  
05-MAR-2004

Repository

Reference No.

10061491

OWNER INFORMATION (Type or Print)

Name

Address

City

GERMANTOWN

State

MD

Zip Code

Residence Telephone Number

E-mail Address

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 provide your name or address to this vehicle manufacturer.

Signature of Owner

Date 3/15/04

VEHICLE INFORMATION

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

1GNDX03E83D202108

Make

CHEVROLET

Model

VENTURE

Model Year

2003

Date Purchased

31-MAR-03

Dealer's Name and Telephone Number

Criswell Chevrolet (301) 948-0880

Engine:

No. Cylinders

6

Fuel Type:

gas

Original Owner

Dealer's City

Smithersburg

State

MD

Zip Code

20878

Transmission Type:

automatic

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

multiple

Failure Mileage

1st ~ 9519

Failure Speed

under 20

Van shifts without warning and intermittently when slowing down for a turn or stop.

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/B5R15)

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), condition, and injury(ies).)

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).

WHEN SLOWING DOWN TO MAKE A TURN VEHICLE DIES UNEXPECTEDLY. \*AK

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-570) 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 responses 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)**

Numerous unexpected vehicle stalls when slowing down for a turn (left or right) or coming to a stop. Vehicle will restart. Dealer has made a number of repair attempts but problem persists. We believe this is a significant safety issue since there is no warning or indication that this will occur and it occurs at the most in-operative moment, usually in the middle of an intersection.

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



**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 79173 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



**VEHICLE OWNER'S QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

**TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR**


**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**

1-888-327-4238

DOT Auto Safety Hotline (DASH) 2 DOT





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http://www.safercar.gov