



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 100079

Date Received

2004 MAR 29 PM 2:29
29-MAR-2004

Repository

Reference No.
10065139

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: LEXINGTON State: KY 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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 4/12/2004

VEHICLE INFORMATION

17 digit Vehicle Identification Number Location of button or switch(es) on driver's side: 1GCCS19K5V [Redacted] Make: CHEVROLET Model: S10 Model Year: 1987
Date Purchased: 03/08/1999 Dealer's Name and Telephone Number: CONRAD, CHEV. 800-745-9424 Engine: No: Cylinders: 6 Fuel Type: Gas
Original Owner: Dealer's City: LEXINGTON, KY State: KY Zip Code: 40511
Transmission Type: AUTOMATIC Antilock Brakes Powertrain: REAR WHEEL DRIVE Vehicle Component Code: 138000 VISIBILITY:WINDSHIELD WIPER/WASHER
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 29-MAR-2004 Failure Mileage: 98000 Failure Speed: 65

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: DOTM19ABC036): [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).

INTERMITTENTLY WINDSHIELD WIPERS BECOME INOPERABLE, OBSTRUCTING THE DRIVER'S VIEW. A RECALL HAS BEEN ISSUED ON SIMILAR MAKES AND MODELS. HOWEVER THIS VEHICLE WAS NOT INCLUDED DUE TO VIN. *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 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.

