



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1387

Date Received: 2004 JUN 26-APR-2004
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OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: VICTORVILLE State: CA Zip Code: [Redacted]
Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]
Evening Telephone Number: [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 signature, you must provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 5/10/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number: Located at bottom of windshield on driver's side: 1G1ZT5487 [Redacted]
Make: CHEVROLET Model: MALIBU Model Year: 2004
Date Purchased: 05-OCT-03 Dealer's Name and Telephone Number: El Monte Power Chevrolet (626) 579-0500
Original Owner: Dealer's City: El Monte State: CA Zip Code: 91731
Transmission Type: Automatic
 Antilock Brakes
 Cruise Control
Powertrain: front wheel drive
Vehicle Component Code: D20000 SUSPENSION
Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 05-DEC-2003
Failure Mileage: [Redacted]
Failure Speed: [Redacted]

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: DOTMALGABC03B): [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).

THERE IS A RATTLING NOISE IN THE STEERING WHEEL WHEN TURNING, WHICH SOUNDS LIKE SOMETHING IS LOOSE. DEALERSHIP SERVICED THE VEHICLE TWICE BEFORE HEARING THE PROBLEM. DEALERSHIP INDICATED A PART NEEDED TO BE REPLACED, AND WILL ORDER THE PART. CONSUMER HAD BEEN WAITING FOR 4 MONTHS FOR THE DEALERSHIP TO RECEIVE THE PART AND INSTALL IT. *AK

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

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**