



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 252

Date Received

17-JUN-2004

Repository

Reference No. 7: 11
10079440

OWNER INFORMATION (Type or Print)

Name

Address

City

PITTSBURGH

State PA

Zip Code

Daytime Telephone Number

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 _____ Date 6/1/04

VEHICLE INFORMATION

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

1G1ZU64804F

Make

CHEVROLET

Model

MALIBU

Model Year

2004

Date Purchased

3/27/04

Dealer's Name and Telephone Number

Jerome Costa

724-337-3566

Engine:

No. Cylinders

6

Fuel Type:

Unleaded

Original Owner

Dealer's City

New Kensington

State

PA

Zip Code

15068

Transmission Type

Automatic

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

015000 STEERING;HYDRAULIC POWER ASSIST SYSTEM

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

17-JUN-2004

Failure Mileage

5600

Failure Speed

30

Steering Column

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/BSR15)

DOT No. (Example: DOTMALSABC036)

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(ies).)

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(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).

WHILE MAKING A RIGHT TURN STEERING WHEEL FAILED. A LIGHT FOR THE STEERING WHEEL FLASHED ON THE DASHBOARD AND REMAINED ON. CONSUMER WAS ABLE TO MAINTAIN CONTROL OF THE VEHICLE, AND DROVE IT TO THE DEALER. MECHANIC INFORMED THE CONSUMER THAT THE CAUSE OF THE PROBLEM HAD NOT BEEN DETERMINED. *AK

Car was towed to first garage. They didn't have time to work on it. The dealer is Cobassy. Towed to where car was purchased they put it on computer and saw that there was a problem with it. They replaced steering column. They had to wait on the part so I didn't have a car for a week

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.

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

Series of horizontal lines for writing the narrative description of the incident.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY INTL. 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

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1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration
<http://www.nhtsa.dot.gov/odiv>

**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).**