

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>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</p>		<p>FOR AGENCY USE ONLY 252</p>	
<p>Date Received: 18-AUG-2004</p>		<p>Repository <input type="checkbox"/></p>		<p>Reference No. 10089231</p>	
<p>OWNER INFORMATION (Type or Print)</p>					
Name		Address		Daytime Telephone Number	
City: GLENDALE		State: AZ		Evening Telephone Number	
Zip Code		E-mail Address			
<p>Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of an authorized signature, this report will be sent to the vehicle manufacturer.</p> <p>Signature of Owner: [Redacted] Date: 8/21/04</p> <p><input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>					
<p>VEHICLE INFORMATION</p>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
1GNCS18W12K239397 1GNCS13W812		CHEVROLET	BLAZER	2001	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
			No: Cylinders 6	Gas	
Original Owner	Dealer's City	State	Zip Code		
	Glendale	AZ	85308		
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Vehicle Component Code		
AUTOMATIC	<input checked="" type="checkbox"/> Cruise Control	WHEEL DRIVE	136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR		
Multiple Failure: 1					
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
Incident Date(s)	Failure Mileage	Failure Speed			
18-AUG-2004		55			
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment	Failure Location:		
		<input type="checkbox"/> Prior Repair			
Tire Component Code			Tire Failure Type		
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</p>					
Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	N	
<p>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).</p>					
<p>WHILE DRIVING IN INCLEMENT WEATHER WINDSHIELD WIPERS CAME ON WHEN THE DRIVER TURNED THE WINDSHIELD WIPERS ON HIGH SPEED. DEALER WAS AWARE OF THIS PROBLEM. DEALER INFORMED THE CONSUMER THAT VEHICLE WAS NOT COVERED UNDER RECALL. *AK</p>					
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY</p>					
<p>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 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.</p>					