



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 1368

Date Received

Repository

2004 SEP 21 AM 9:08
30-AUG-2004

Reference No.
10099007

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City HIXSON State TN Zip Code [Redacted]

Daytime Telephone Number [Redacted] E-mail Address [Redacted]

Evening Telephone Number [Redacted]

Do you authorize NHTSA to contact the manufacturer of your vehicle?
In the absence of an authorized signature, your name or address to the vehicle manufacturer.
Signature of Owner [Redacted]

YES NO
Date 9/14/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1G1ZT548X4F [Redacted] Make CHEVROLET Model MALIBU Model Year 2004

Date Purchased 4/16/04 Dealer's Name and Telephone Number Hall Chevrolet 423-496-4552 Engine: No. Cylinders 6 Fuel Type: Reg
Original Owner Dealer's City Cleveland, TN State TN Zip Code 37323

Transmission Type Auto. Antilock Brakes Cruise Control Powertrain Vehicle Component Code Q12200 STEERING; COLUMN LOCKING; ANTI-THEFT DEVICE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 12 JUN 2004 Failure Mileage 5141 Failure Speed 20mph. Electric Power Assist Steering
24 Aug 2004

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/B5R16) [Redacted]
DOT No. (Example: DOTM123ABC038) 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 [Redacted]

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 DRIVING, WHEEL LOCKED UP AND THE CONSUMER LOST POWER STEERING. DEALERSHIP WAS NOTIFIED, BUT DID NOT RESOLVE THE PROBLEM. *AK*

Please Ref. To DOT ID 10089025
on your web site
Need Recall AS soon AS possible

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.