



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-DDT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 120

Date Received

Repository

08-SEP-2004

Reference No.
10081726

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City SPARTANBURG State SC 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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2GTEC18KXR Make GMC Model PICK UP Model Year 1994

Date Purchased 12/95 Dealer's Name and Telephone Number _____ Engine: No. Cylinders 8 Fuel Type: GAS

Original Owner Dealer's City _____ State _____ Zip Code _____

Transmission Type Auto Antilock Brakes Cruise Control Powertrain _____ Vehicle Component Code 136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 08-SEP-2004 Failure Mileage _____ Failure Speed _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make _____ Tire Model (Name or Number) _____ Tire Size (Example P215/65R15) _____

DOT No. (Example: DOTM19ABC036) 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 _____ Number of Deaths _____ 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)).

CONSUMER COMPLAINED ABOUT WINDSHIELD WIPER PROBLEM. CONTACTED BOTH THE DEALER AND MANUFACTURER, AND THEY BOTH STATED THAT THERE WERE NO RECALLS ON THIS VEHICLE. CONSUMER MAINTAINED THAT THERE WERE OTHER RECALLS ON VEHICLE. *AK

OTHER VEHICLES NEAR THIS SAME VIN # WERE RECALLED BUT THIS ONE WAS NOT, YET IT FAILED.

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)

Windshield wiper motor delay BOARD FAILED
MAKING WIPERS INOPERATIVE. THIS VIN# WAS
NOT IN RECALL OF OTHERS WITH THIS
SAME PROBLEM.

IT SHOULD HAVE INCLUDED THIS VIN WITH
NHTSA RECALL OF THIS PROBLEM

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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 79178 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. 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

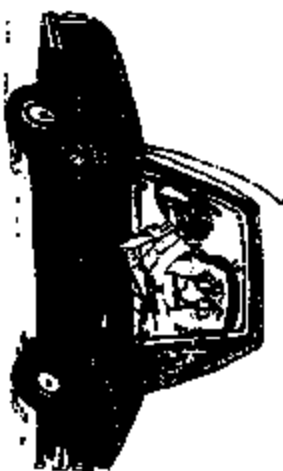
DASH2DOT

and dial toll free at

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1-888-327-4236

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(DASH) & DOT



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