



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 241

Date Received

Repository

15-SEP-2004

Reference No.

10062330

PM 2:28

OWNER INFORMATION (Type or Print)

Name

Address

City

HIGH POINT

State

NC

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 a signature, please print your name or address to the vehicle manufacturer.

Signature of Owner

Date

9/1/2004

VEHICLE INFORMATION

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

1G1ZT54834F

Make

CHEVROLET

Model

MALIBU

Model Year

2004

Date Purchased

10-DEC-03

Dealer's Name and Telephone Number

Engine

No: Cylinders 6

Fuel Type:

Gas

Original Owner

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

010000 STEERING

Multiple Failure: **X 2**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

08-SEP-2004

Failure Mileage

6300

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

0

0

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).

VEHICLE LOST POWER STEERING ASSIST WHILE COMING TO A STOP LIGHT. THE VEHICLE WAS TAKEN TO THE DEALER. DEALER REPLACED A COLUMN KIT. PLEASE PROVIDE ANY FURTHER INFORMATION. *JBB

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

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.