



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 1220

Date Received

2005 FEB -7
28-SEP-2004

Repository ☐

Reference No.
10094541

OWNER INFORMATION (Type or Print)

Name XXXXXXXXXX
Address XXXXXXXXXX
City DEMOPOLIS State AL Zip Code XXXXXX

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 09/17/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1GKDS135822 XXXXXXXXXX Make CHEVROLET
GMC Model 02/GMC
ENVOY 2WD
+DR Model Year 2002

Date Purchased 06/07/01 Dealer's Name and Telephone Number 1-321-633 9300
Quality Pontiac GMC Truck Inc. Engine:
Original Owner ☒ Dealer's City Cocoa, FL No. Cylinders
State FL Zip Code 32926

Transmission Type Auto. ☒ Antilock Brakes ☒ Cruise Control Powertrain
Vehicle Component Code 010000 STEERING
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-JAN-2001 Failure Mileage 1800 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 Failure Location:
☐ Prior Repair
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).

WHILE DRIVING STEERING BECAME ERRATIC. CONSUMER HAD TO HOLD THE WHEEL WITH BOTH HANDS TO KEEP THE VEHICLE IN ITS LANE.
THIS HAS BEEN AN ONGOING PROBLEM FOR ABOUT THREE YEARS. *AK

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.