



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 100247

Date Received: 2005 FEB 04
04-FEB-2005
Repository:
Reference No.: 10110908

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: MEMPHIS State: TN Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]
Evening Telephone Number: [REDACTED]
E-mail Address: [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature, your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 2-12-05

VEHICLE INFORMATION

17 digit Vehicle Identification Number: Located at bottom of windshield on driver's side: 1G1JC5246X7 [REDACTED]
Make: CHEVROLET Model: CAVALIER Model Year: 1999

Date Purchased: 05/2000 Dealer's Name and Telephone Number: Bill Heard Chevrolet
Original Owner: Dealer's City: Memphis State: TN Zip Code: 38116
Engine: No. of Cylinders: [REDACTED] Fuel Type: [REDACTED]

Transmission Type: [REDACTED] Antilock Brakes Cruise Control
Powertrain: [REDACTED] Vehicle Component Code: 125000 EXTERIOR LIGHTING: BRAKE LIGHTS
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 01-AUG-2004 Failure Mileage: [REDACTED] Failure Speed: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM19ABC036): [REDACTED] 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: 0 Number of Deaths: 0 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).

BRAKE LIGHT ARE NOT FUNCTIONING WHEN REPLACING BULB. ALSO, THE LIGHTS ON THE DASHBOARD CONTINUOUSLY COME ON AND OFF. THE CAUSE OF THIS IS UNDETERMINED.

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 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)

I replaced the bulb only to find out that it was not the bulb, but the electrical system. I was pulled over due to "no tail light" but was only given a warning. I can't go through vehicle inspection to renew my tags because 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 73173 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

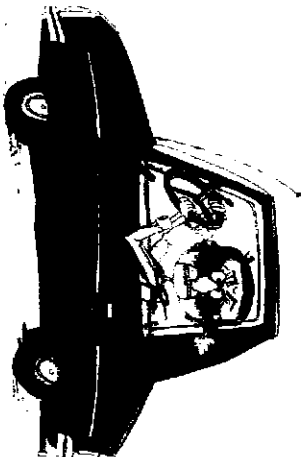
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