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

2005 MAR -8 P1 11:43

FOR AGENCY USE ONLY 241	
Date Received 09-FEB-2005	Repository ☐
	Reference No. 10111189

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City LA CRESCENTA	State CA	Zip Code [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 e[redacted]while your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 2/15/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GDE4C1184[redacted]	GMC	C4500	2003

Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
11-SEP-03	TEC OF CALIFORNIA	909-349-0200	No. Cylinders 8	Diesel
Original Owner ☒	Dealer's City FONTANA	State CA / Zip Code 92335		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	105500 POWER TRAIN:DRIVELINE:DIFFERENTIAL UNIT Multiple Failure: 6

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
05-JAN-2005	3300		

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: DOTMALSABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	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 WAS EXPERIENCING A PROBLEM WITH GREASE FROM THE REAR END LEAKING ONTO THE LEFT REAR WHEEL BRAKING SYSTEM. THIS CAUSED LOSS OF BRAKING IN THAT WHEEL. DEALER REPLACED THE GREASE SEAL WITH AN UPGRADED SEAL SIX TIMES. PROBLEM RECURRED. *AK at one time, tec of calif. replaced rear grease seal. when we got it back in service,the driver side brake caliper bolt fell out causing the caliper to rub the inside of the inner dual wheel causing damage to the caliper and wheel. instead of taking it back to the dealer, we repalced the bolt at our facility.i called the service manager and made this problem aware to him. this failure was caused by the mechanic that replaced the seal, not to tighten the bolt correctly. we are now replacing the seals at our facility to avoid anymore down time.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY