



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  
(1-888-327-4238)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100248

Date Received: 11-FEB-2005  
Repository:  NHTSA  
Reference No.: 10111342

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: SEVERN State: MD Zip Code: [Redacted]  
Daytime Telephone Number: [Redacted]  
Evening Telephone Number: [Redacted]  
E-mail Address: [Redacted]

Do you authorize NHTSA to include a copy of this report to the manufacturer of your vehicle?  
In the absence of a signature, provide your name or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 2/23/05  YES  NO

**VEHICLE INFORMATION**

17-Seat Vehicle Identification Number located at bottom of windshield on driver's side: 3GNFK16Z73G [Redacted]  
Make: CHEVROLET Model: SUBURBAN Model Year: 2003  
Date Purchased: [Redacted] Dealer's Name and Telephone Number: FRONTIER CHEV  
Original Owner:  Dealer's City: OAK HARBOR State: WA Zip Code: 98277  
Engine: No. Cylinders: 8 Fuel Type: Gas  
Transmission Type: AUTOMATIC  Antilock Brakes  Cruise Control  
Powertrain: 4 WHEEL DRIVE  
Vehicle Component Code: 010000 STEERING  
Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 09-FEB-2005  
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: DOT M3SABC036): [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(es).)

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(es).  
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).

① THE STEERING SHAFT NEEDED TO BE REPLACED BECAUSE THE ABILITY TO MAINTAIN CONTROL OF THE VEHICLE WAS DIFFICULT. THE MANUFACTURER WAS CONTACTED BY CONSUMER AND WAS AWARE OF THE PROBLEM. \*JB  
② this problem is rampant w/ Chevy - there is a national back-order for the steering shafts. Why is there no RE-call?  
③ FIXED - SHAFT REPLACED AT SBA Chevy in Maryland.

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-570) 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.