



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 252

Date Received

02-MAR-2005

Repository ☐

Reference No.
10113305

OWNER INFORMATION (Type or Print)

Name

Address

City WEST BRANCH

State MI

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?
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. ☐ YES ☒ NO

Signature of Owner

Date 4/1/05

VEHICLE INFORMATION

1) Give Vehicle Manufacturer Name: Located at bottom of windshield on driver's side

1GTHK23151F

Make GMC

Model

2500 HD

Model Year

2001

Date Purchased

4-2001

Dealer's Name and Telephone Number

Labadie Olds - GMC

Engine:

No. Cylinders 8

Fuel Type:

~~Gas~~ Diesel

Original Owner

☒

Dealer's City

Bay City

State

MI

Zip Code

48708

Engine:

Diesel 8

Fuel Type:

Diesel

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

034510 SERVICE BRAKES, HYDRAULIC: FOUNDATION COMPONENTS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

02-MAR-2005

Failure Mileage

139,000

Failure Speed

70

Brakes

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: DOTM18ABC036)

☐ 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

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).

DRIVER APPLIED THE BRAKES AND THE PEDAL WENT TO THE FLOOR WHILE DRIVING, ON THE HIGHWAY. DRIVER PULLED OVER, AND NOTICED THAT THE LEFT FRONT SIDE WHEEL LOCKED UP AND WAS UNABLE TO UNLOCK IT. DRIVER HAD THE VEHICLE TOWED TO THE DEALER. MECHANIC DETERMINED THAT THE LEFT FRONT SIDE BRAKE CALIPER SHEARED OFF, AND THE WHEEL NEEDED TO BE REPLACED. *AK

GM Doesn't seem concerned at all about This
Brake Caliper Failure

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Traveling at posted speed on Freeway Left Front wheel
locked up / Pulled me into median of Highway / Had Vehicle
Towed Home / checked wheel & Found 2 Bolts Sheared off
causing caliper to come loose & jam in wheel opening Tearing
Brake line & causing incident

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20580

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

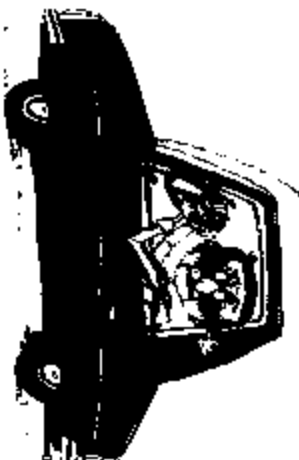
DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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