



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 1367

Date Received

2005 MAR 25 AM 9:43

Repository

Reference No.
10117017

OWNER INFORMATION (Type or Print)

Name _____
Address: _____
City GREENSBURG State PA 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? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 3/25/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GNDD13W2K2
Make: CHEVROLET Model: BLAZER Model Year: 1999
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: AUTOMATIC
 Antilock Brakes
 Cruise Control
Powertrain: 4 WHEEL DRIVE
Vehicle Component Code: 036000 SERVICE BRAKES, HYDRAULIC; ANTILOCK
Multiple Failure: 12

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 01-MAR-2005
Failure Mileage: 70000
49,000
Failure Speed: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: _____ Tire Model (Name or Number): _____ Tire Size (Example P215/65R16): _____
DOT No. (Example: DOTM19ABC096) Original Equipment Prior Repair Failure Location: _____
Tire Component Code: _____ Tire Failure Type: _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: _____ Data 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), condition, 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)).

THE ABS BRAKES ENGAGED PREMATURELY WHEN THE BRAKE PEDAL WAS DEPRESSED. WHEN THIS OCCURRED THE BRAKES FAILED TO STOP THE VEHICLE IMMEDIATELY, RESULTING IN EXTENDED STOPPING DISTANCE. THE CAUSE OF THIS FAILURE HAS YET TO BE DETERMINED, PENDING DEALERSHIP INSPECTION. *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.