



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 100148

Date Received

2005 JUN 24

10-MAY-2005

Repository ☐

AM 10:19

Reference No.

10120506

OWNER INFORMATION (Type or Print)

Name

Address

City

PLYMOUTH

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?

☒ YES

In the absence of an authorized

address to the vehicle manufacturer.

Signature of Owner

Date

6/15/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1GNEK13T31

Make

CHEVROLET

Model

TAHOE

Model Year

2001

Date Purchased
07-JAN-01Dealer's Name and Telephone Number
LOU LARICHE 734-453-4600

Engine:

No: Cylinders 8

Fuel Type:

Gas

Original Owner
☒Dealer's City
PLYMOUTH ROADState
MIZip Code
48170Transmission Type
AUTOMATIC☒ Antilock Brakes
☒ Cruise ControlPowertrain
4 WHEEL DRIVE

Vehicle Component Code

036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK

Multiple Failure: 4

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
03-APR-2005Failure Mileage
75920Failure Speed
3

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: DOTM19ABC036)

☐ 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

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).

DT: 2001, CHEVROLET TAHOE. HAVING SEVERE ANTI-LOCK BRAKE PROBLEMS AT LOW SPEED, 3-5 MPH. THIS HAPPENS ON DRY PAVEMENT. WHEN COMING TO A STOP THE PEDAL STARTS TO PULSATE VIOLENTLY AND THE VEHICLE WILL NOT STOP. THIS OCCURS WHEN IT IS IN TWO WHEEL DRIVE. THE TAHOE IS A 4-WHEEL ANTI LOCK. THE TRUCK WAS TAKEN TO THE DEALER. HOWEVER, THEY REFUSED TO FIX THE PROBLEM. DEALER STATED THERE WAS NOTHING WRONG WITH THE ABS SYSTEM. *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 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)

The description of the problem on the inside is accurate.
A second dealer, aware of the recall in Canada for the
identical problem, replaced the front wheel rotation
sensors. There have been no further problems

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**National Highway
Traffic Safety
Administration**

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

**TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM**

OR

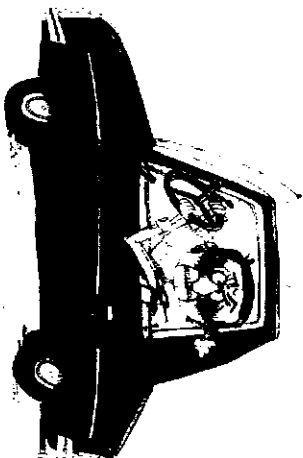
DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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