



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 AUG

05-JUL-2005

Repository ☐

10127467

OWNER INFORMATION (Type or Print)

Name
Address
City GROVE TOWN State GA 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 8/1/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
Make CHEVROLET Model SILVERADO Model Year 2001

Date Purchased _____ Dealer's Name and Telephone Number _____
Engine: No. Cylinders 8 Fuel Type: Gas

Original Owner ☐ Dealer's City _____ State _____ Zip Code _____

Transmission Type ☒ Automatic ☒ Antilock Brakes ☒ Cruise Control Powertrain 4 WHEEL DRIVE
Vehicle Component Code 081000 ENGINE AND ENGINE COOLING:ENGINE
Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 05-JUN-2005 Failure Mileage 43000 Failure Speed _____

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: IN JUNE 2005 TRUCK STALLED. FIRST TIME IT STALLED WHILE SITTING IN THE VEHICLE. NOW WHILE THE VEHICLE IS AT HIGHWAY SPEEDS, THE ENGINE STALLED WITH A TOTAL LOSS OF POWER STEERING AND BRAKES. NO WARNING LIGHTS, VEHICLE OPERATED NORMALLY BEFORE THIS OCCURRED. THERE ARE NO OTHER APPARENT PROBLEMS WITH VEHICLE. IT IS REGULARLY SERVICED. THE PROBLEM SEEMS TO BE GETTING PROGRESSIVELY WORSE. *AK

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

This Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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)

ON 7/12/05 THE DEALER REPLACED THE CRANKSHAFT POSITION SENSOR. SINCE THEN, THE VEHICLE HAS NOT SHUT OFF.

GRADE INFORMATION (CLASS, SEV, YR)

VEHICLE IDENTIFICATION	VEHICLE MAKE	VEHICLE MODEL	VEHICLE YEAR
VEHICLE TYPE	VEHICLE COLOR	VEHICLE VIN	VEHICLE ENGINE
VEHICLE MAKE	VEHICLE MODEL	VEHICLE YEAR	VEHICLE VIN
VEHICLE TYPE	VEHICLE COLOR	VEHICLE VIN	VEHICLE ENGINE

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

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



1-2-1
1-7-1

**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

ON

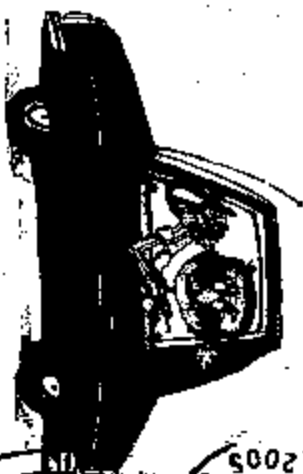
DASH2DOT

and dial toll free at

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