



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

FOR AGENCY USE ONLY 100148

Date Received

Repository ☐

2005 SEP 29 AM 11:00
20-AD0-2005

Reference No.
10134573

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City PARKLAND State FL Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

Evening Telephone Number [REDACTED]

Do you authorize NHTSA to receive a copy of this report to the manufacturer of your vehicle?
In the absence of an explicit "NO" provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 9/28/05 YES ☒ NO ☐

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1CNEC1322 [REDACTED] Make CHEVROLET Model TAHOE Model Year 2004
Date Purchased [REDACTED] Dealer's Name and Telephone Number LOU BACHRODT CHEVROLET Engine: No. Cylinders 8 Fuel Type: Gas
Original Owner ☒ Dealer's City COCONUT CREEK State FL Zip Code 38073
Transmission Type AUTOMATIC ☒ Antilock Brakes ☒ Cruise Control Powertrain FRONT WHEEL DRIVE Vehicle Component Code 060000 ENGINE AND ENGINE COOLING Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 05-JUN-2005 Failure Mileage 14000 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 P216/65R15) [REDACTED]
DOT No. (Example: DOTM19ABC036) ☐ 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

Name: [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(ies).)

Crash: ☐ Yes ☒ No Fire: ☐ Yes ☒ No Number of Persons Injured [REDACTED] Number of Deaths [REDACTED] Reported to Police [REDACTED]

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: THE CALLER STATED VEHICLE STALLS. THIS HAPPENS WHEN DRIVING AT SLOWER SPEEDS AND IDLING. THE ENGINE HESITATED JUST BEFORE IT STALLED. DEALER SAID THE PROBLEM WAS IN A COMPUTER CHIP THE FIRST TIME. THE SECOND TIME HE HAD IT IN THEY TOLD HIM HE MAY BE OUT OF GAS THEY COULD NOT DUPLICATE THE PROBLEM. MANUFACTURER WAS CALLED AND HE FILED A COMPLAINT WITH THEM.
*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.