



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
2006 JAN -4 PM 2:51
02-SEP-2005

Repository
Reference No.
10135189

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City SHARPSBURG State GA Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature, please print your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 9/23/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1GKEC13V51R [REDACTED] Make GMC Model YUKON Model Year 2001

Date Purchased 02-MAY-02 Dealer's Name and Telephone Number ANDY LEWIS DODGE Engine: No: Cylinders 8 Fuel Type: Gas

Original Owner Dealer's City NEWNAN State GA Zip Code 30265

Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 050000 PARKING BRAKE Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 25-MAY-2002 Failure Mileage 30000 Failure Speed N/A

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [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

Make: [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 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 GMC YUKON. THERE WAS A RECALL #05042, FOR THE PARKING BRAKE, HOWEVER THE RECALL DID PERTAIN TO THE CONSUMERS VEHICLE. THE PARKING BRAKE DID NOT WORK. THIS STARTED APPROXIMATELY MAY 25, 2002. THE BRAKES DRAGGED AND EVENTUALLY WORE OUT BECAUSE OF A SPRING THAT WAS NOT WORKING PROPERLY WHEN THE PARKING BRAKE WAS RELEASED. THE VEHICLE HAS NOT BEEN IN TO BE SERVICED FOR THIS PROBLEM, BUT WAS DIAGNOSED BY AN INDEPENDENT MECHANIC. *JB

Recall #05042 was not for the GMC Yukon, but for another make. The recall failure is the same failure that I have on my Yukon

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 ~~br~~
The parking brake has a spring that ^{is} too weak
and allowed the brake shoe to drag & wear out
while the brake was released.

Due to this failure my vehicle has ~~no~~
no parking brake capability

[Redacted] 9-23-05

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
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BUSINESS REPLY MAIL

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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

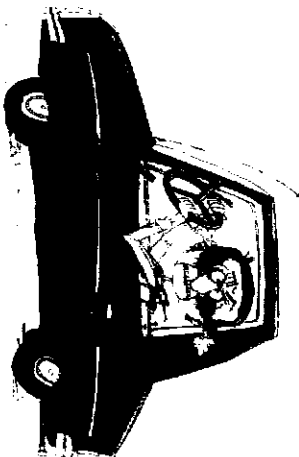
DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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