Form Approved: O.M.B. No. 2127-0008

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	Repository
2005 NOV 10 PM 2:57 09-SEP-2005	☐
	Reference No. 10136016

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address			
City: LITTLETON	State: CO	Zip Cod	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 ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GNEK13R3XJ	CHEVROLET	TAHOE	1999

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
01-APR-02	THORNTON CHEVROLET 717-266-8800			No: Cylinders 8	Gas
Original Owner ☐	Dealer's City: MANCHESTER	State: PA	Zip Code: 17345		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain: 4 WHEEL DRIVE	036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
02-SEP-2005	90,100	2.5 mph	brakes studdered coming to a stop. Anti-lock failed. Unusual noise.

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
BFG Long Trail TA		245/75/16
DOT No. (Example: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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: THE CALLER WAS ~~NOT AWARE OF A PROBLEM~~ WITH VEHICLE BUT INSISTED WAS DENIED RECALL 05V379000 CONCERNING ABS BRAKES BECAUSE VEHICLE WAS REGISTERED IN COLORADO AND NOT IN NEW YORK AND PENNSYLVANIA. THIS WAS TOLD TO HIM BY THE MANUFACTURER. *AK Caller remembered problem at approx 90,100 miles approx. Nov 04. See description above.

Chevy excluded recall for Colorado. Vehicle was driven majority of it's live in Pennsylvania.

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