



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 OCT -6 AM 5:50**  
Repository   
Reference No. 10136238

**OWNER INFORMATION (Type or Print)**

Name [REDACTED] Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]  
Address [REDACTED]  
City NORTHFIELD CENTER State OH Zip Code [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 [REDACTED] Signature of Owner [REDACTED] Date 9/26/05

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3GNFK16R9TG [REDACTED]  
Make GMC Model SUBURBAN Model Year 1996  
Date Purchased 26-MAY-98 Dealer's Name and Telephone Number SPITZER CHEVERLOT Engine: No: Cylinders 8 Fuel Type: Gas  
Original Owner  Dealer's City NORTHFIELD State OH Zip Code [REDACTED]  
Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 036000 SERVICE BRAKES, HYDRAULIC: ANTILOCK  
Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 10-SEP-2005 Failure Mileage 74000 Failure Speed 3

**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: 1996 CHEVROLET SUBURBAN. A MANUFACTURER'S RECALL 05068 CONCERNING ABS BRAKES ON THE 1999 THROUGH 2002 MODELS, WAS ISSUED. THIS VEHICLE WAS NOT INCLUDED IN THE RECALL ALTHOUGH IT EXPERIENCED THE SAME PROBLEM AS MENTIONED IN THE RECALL. HAD NOT TAKEN VEHICLE TO THE DEALER YET, BUT THE CONSUMER KNEW THAT THERE WAS NO RECALL ON THIS MAKE AN MODEL, AND YEAR FOR THE ABS. THE ABS ACTIVATED BETWEEN 3-10 MPH, CAUSING EXTENDED STOPPING DISTANCE. THIS STARTED HAPPENING ABOUT SIX MONTHS AGO, NOT EVERY TIME. NOW, IT HAPPENS EVERY TIME WHILE DRIVING THE VEHICLE UNDER ANY ROAD CONDITIONS. THERE HAVE BEEN NO ACCIDENTS BECAUSE OF THIS, BUT IT IS JUST A MATTER OF TIME. COULD NOT COUNT THE NUMBER OF TIMES THE ABS FAILED. \*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.