U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defect

1-888-DASH-2-DOT

(1-888-327-4236)

INTERNET:www.nhtsa.dot.gov/hotline

2005 SEP 29 PM 4:05

FOR AGENCY USE ONLY 100148	
Date Received 15-SEP-2005	Repository ☐
	Reference No. 10136553

OWNER INFORMATION (Type or Print)

Name [redacted]			Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]			Evening Telephone Number	
City SAUGERTIES	State NY	Zip Code [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 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
1G1JC124XVM[redacted]	CHEVROLET	CAVALIER	1997

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type: Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☐ Cruise Control	FRONT WHEEL DRIVE	070000 FUEL SYSTEM, GASOLINE Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
29-AUG-2005	112000		

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: 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			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 RECALL 00V053000 WAS ISSUED CONCERNING THE FUEL SYSTEM. THIS VEHICLE WAS NOT INCLUDED DUE TO VIN. GASOLINE WAS LEAKING FROM THE RETURN AND THE FEED. THE RETURN STARTED LEAKING FIRST, AND THEN, A MONTH LATER, THE FEED LINE STARTED LEAKING. NOTICED IT ON JULY 29, 2005 THIS IS WHEN THE RETURN METAL FITTING WAS LEAKING, AND THE RETURN STARTED LEAKING ON AUGUST 29, 2005. CONTACTED THE DEALER, THE PART THAT HAS TO BE REPLACED, INCLUDING THE WHOLE UNIT, AND WITH LABOR WOULD COST $600.00 OR $700.00. ALSO, IGNITION SWITCH RECALL 02V070000. THIS VEHICLE FAILED TO START. THE VEHICLE WOULD NOT TURN OVER IT COMPLETELY. THE DASH WARNING LIGHTS WOULD COME ON. THE DEALER HAS NOT LOOKED AT ANY OF THESE PROBLEMS. THERE WAS ALSO A RECALL 98V146000 CONCERNING AIR BAGS. VEHICLE'S AIR BAG LIGHT WAS ON. DID NOT HAVE THE DEALER CHECK THIS.
*AK

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

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

The feed line sprung a leak in August the return line sprung a leak earlier in July 29 Approx

Timeline: Approx. July 29, 2005 Return line springs a leak spewing gasoline on exhaust system

Approx. Aug 29 or earlier Feed line springs a leak contacted "dealerships" Heart Chevrolet and Sager Chevrolet told cost of repair $500.00 +

Note there are two gasline failures "Feed + Return"

ATTACH ADDITIONAL SHEETS IF NECESSARY

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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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

VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

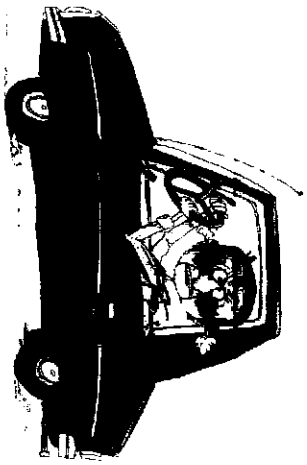
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



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