



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

15-SEP-2005

Repository

Reference No.
10136554

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City CUMBERLAND State KY Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address

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 9/15/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1GCDT1 [REDACTED] Make CHEVROLET Model COLORADO Model Year 2005

Date Purchased
28-JUL-05

Dealer's Name and Telephone Number
GREECH CHEVROLET BUICK 808-573-3530

Engine:
No: Cylinders
5

Fuel Type:
Gas

Original Owner

Dealer's City
HARLAN

State KY Zip Code 40891

Transmission Type
AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain
4 WHEEL DRIVE

Vehicle Component Code
221300 SEATS:FRONT ASSEMBLY:HEAD RESTRAINT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 28-JUL-2005
Failure Mileage 152
Failure Speed

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: DOTM16BABC036) 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(es).)

Crash: Yes No
Fire: Yes No
Number of Persons Injured _____ Number of Deaths _____ Reported to Police N

Normative Description of Incident(s), Crash(es), and Injury(es)

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 SAID THE BACK SEAT HEADREST WAS TOO TALL AND COVERED THE BACK WINDOW, AND HE COULD NOT SEE OUT TO BACK UP. DEALER WANTED TO SELL HIM ANOTHER VEHICLE THAT WAS MORE EXPENSIVE. THE MANUFACTURER SAID TO LAY THE SEAT DOWN TO BACK OUT. *AK

A letter concerning this matter has been sent separately. The Post Office would not allow us to attach it to this form.

Include, if available:
The Privacy Act of 1974-P
amendments. You are not
should take appropriate
or a statistical summary

ADDITIONAL SHEETS IF NECESSARY
may Traffic Safety Act, and subsequent
determining whether a Manufacturer
tion against a manufacturer, your response.