



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 09 PM
01 NOV 2005

Reference No.
10141390

OWNER INFORMATION (Type or Print)

Name

Address

City PERU

State MA

Zip Code

Daytime Telephone Number

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 / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1GTEK19T21E

Make

GMC

Model

SIERRA

Model Year

2001

Date Purchased
06-NOV-01

Dealer's Name and Telephone Number
SOUTHGATE MOTORS INC

Engine:

No: Cylinders 8

Fuel Type:

Gas

Original Owner
☒

Dealer's City
PITTSFIELD

State
MA

Zip Code
01201

Transmission Type
AUTOMATIC

☒ Antilock Brakes
☒ Cruise Control

Powertrain
4 WHEEL DRIVE

Vehicle Component Code

036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK

(NOW MODULE CONTROL BOX)

Multiple Failure: 1 - 2 (ALL DUE TO CORROSION)

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
01-OCT-2004
01-JUNE 2005

Failure Mileage

Failure Speed

SENSORS & HUB FAILED - JUNE '05' MODULAR -
CONTROL BOX FAILED - DUE TO SAME GENT AREA -

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: DOTM19ABC036)

☐ 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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

Yes

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 CONTACT RECEIVED A RECALL 05V379000 CONCERNING ABS BRAKES. HAD PREVIOUSLY THE REPAIR WORK DONE. WHEN SHE CONTACTED GENERAL MOTORS, THEY TOLD HER THEY WOULD REIMBURSE HER FOR THE REPAIR WORK, BUT SHE WOULD HAVE TO PAY FOR HALF OF THE REMAINING REPAIR WORK. . SINCE REPAIRS THE ABS LIGHT HAS BEEN ON AND IT FEELS AS THOUGH THE BRAKES DO NOT WORK. THE VEHICLE WAS TAKEN BACK TO THE DEALERSHIP, AND THEY FOUND THE ELECTRONIC CONTROL MODULE NEEDED TO BE REPLACED. *AK

ABS LIGHT HAS NEVER GONE OFF SINCE THE REPAIRS
NOW I AM TOLD IT IS THE MODULE CONTROL BOX
DUE TO CORROSION - GM WILL PAY FOR 1/2 OF THE REPAIR

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 to 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)

AFTER HAVING SENSOR AND HUB REPAIRED. THE ABS
LIGHT IS STILL ON. UPON STOPPING IT FEELS LIKE THE
BRAKES WILL NOT WORK AND YOU ARE NOT GOING
TO STOP. FEELS LIKE YOUR FOOT GOES TO THE
BOTTOM OF THE FLOOR WHEN PUSHING ON THE
BRAKE PEDAL... I FEEL THIS PROBLEM
CORRELATES WITH THE SENSOR AND HUB PROBLEMS.
DUE TO HAVING AND WORKING IN THE SNOW-SALT
BELT REGION - I FEEL THESE PROBLEMS ARE RELATED.

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

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
OWNER'S
QUESTIONNAIRE**



DOT AUTO SAFETY HOTLINE

**TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM**

OR

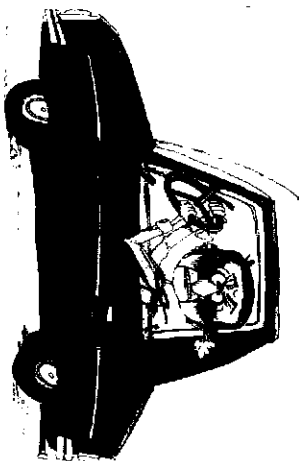
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and dial toll free at

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