



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

17-NOV-2005

Repository ☐

Reference No.

10142669

OWNER INFORMATION (Type or Print)

Name

Address

City BAY CITY

State MI

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 1/1

VEHICLE INFORMATION

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

1GNFK16T

Make

CHEVROLET

Model

SUBURBAN

Model Year

2001

Date Purchased

15-FEB-01

Dealer's Name and Telephone Number

GRADY CHEVROLET

Engine

No. Cylinders 8

Fuel Type

Gas

Original Owner

☒

Dealer's City

BAY CITY

State

MI

Zip Code

48706

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)

30-JAN-2004

Failure Mileage

75022

Failure Speed

ECAM ANTI-LOCK BRAKE MODULE SHORTED

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/B5R15)

DOT No. (Example: DOTM18ABC036)

☐ 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), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

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).

OT: CONTACT STATED THE CONTROL MODULE FOR THE ABS SYSTEM SHORTED OUT. THE INDICATOR LIGHTS IN THE DASHBOARD HAD BEEN ON. THE MOTOR TO ABS SYSTEM WOULD RUNNING CONTINUOUSLY. HE REMOVED THE FUSE TO THE ABS SYSTEM. THE ABS SYSTEM NO LONGER WORKED. HE CONTACTED THE DEALER, WHO STATED THEY COULD REPLACE THE MOTOR, HOWEVER, THEY OFFERED NO FREE REMEDY. *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 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)

THE ABS AND BRAKE CAME ON IN DASH WHILE DRIVING. THE MOTOR IN THE MODULE RAN ALL THE TIME, EVEN WITH KEY SHUT OFF. I HAD TO REMOVE THE FUSE TO THE MODULE OR IT WOULD HAVE KILLED THE BATTERY.

THE DEALER CHECKED IT OUT AND SAID THE MODULE WAS SHORTED OUT INTERNALLY, THE ONLY FIX WAS TO REPLACE IT AT A VERY HIGH PRICE. I CHOSE NOT TO HAVE IT FIXED AT THIS TIME.

AFTER GETTING TWO RECALLS ON THIS TRUCK, I DECIDED TO REPORT THIS SAFETY PROBLEM.

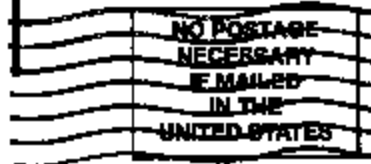
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U.S. Department
of Transportation

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, NHTSA-216
400 7th Street, SW
Washington, DC 20590



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

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

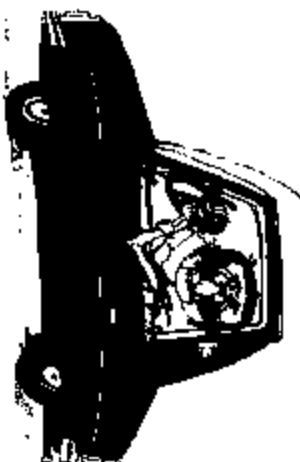
OR

DASH2DOT

and dial toll free at

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1-888-327-4236**

DOT Auto Safety Hotline
(DASH) 2 DOT



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**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**