



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 2006 JAN -4 PM 2:45
28-NOV-2005
Repository ☐
Reference No.
10143812

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City SALISBURY State NC Zip Code [REDACTED]
Daytime Telephone Number [REDACTED]
Evening Telephone Number [REDACTED]
E-mail Address [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 a copy of this report to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 12/7/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
2GCEK19T [REDACTED]
Make CHEVROLET Model CHEVROLET TRUCK Model Year 2000
Date Purchased 01-DEC-89 Dealer's Name and Telephone Number DAVIS CHEVROLET
Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner ☒ Dealer's City LEXINGTON State NC Zip Code [REDACTED]
Transmission Type AUTOMATIC ☒ Antilock Brakes ☒ Cruise Control Powertrain 4 WHEEL DRIVE
Vehicle Component Code 181000 VEHICLE SPEED CONTROL: ACCELERATOR PEDAL
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-NOV-2005
Failure Mileage 37534
Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15)
DOT No. (Example: DOTM18AHC036) ☐ 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: THE CONTACT STATED THE ACCELERATOR PEDAL WAS STICKING. THE ACCELERATOR WOULD HAVE TO BE PUSHED HARD TO RELEASE. THE VEHICLE WOULD SPEED UP WHILE THE ACCELERATOR WAS STUCK. THE VEHICLE WAS TAKEN TO THE DEALERSHIP, AND THEY PERFORMED TWO UPGRADES TO THE VEHICLE. THERE HAVE BEEN NO PROBLEMS SINCE THE REPAIRS. *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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.

**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).**