



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 11
14-DEC-2005

Repository
Reference No.
10145205

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City CINCINNATI State OH Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [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 authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 12/20/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GNFK1 [REDACTED]
Make: CHEVROLET Model: SUBURBAN Model Year: 2005
Date Purchased: 01-AUG-03 Dealer's Name and Telephone Number: THOMPSON MCCONNELL CADILLAC 513-221-5600 Engine: No: Cylinders 8 Fuel Type: Gas
Original Owner: Dealer's City: CINCINNATI State: OH Zip Code: [REDACTED]
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: 4 WHEEL DRIVE Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC; ANTILOCK Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 08-DEC-2005 Failure Mileage: 109000-106,900 Failure Speed: 5 ABS sensors

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM15ABC036): [REDACTED] 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), and injury(ies).)

Crash: Yes No Fire: Yes No Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: Y

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 ABS ACTIVATED AT LOW SPEEDS. THE MECHANIC BLED THE BRAKES AND REPLACED THE BRAKE PADS. THE ABS ACTIVATED WHILE DRIVING AROUND A CURVE AT LESS THAN 5 MPH. THE ROADS WERE ICY, AND THE VEHICLE WAS IN 4-WHEEL DRIVE. THE BRAKES LOCKED, BUT THE VEHICLE KEPT MOVING UNTIL IT CRASHED INTO ANOTHER VEHICLE THAT WAS PARKED. THE ABS HAD BEEN ACTIVATED AT LOW SPEEDS SIX MONTHS BEFORE THE ACCIDENT. THE ABS ACTIVATION WAS INTERMITTENT, AND MANY TIMES THE BRAKES WERE DIFFICULT TO DEPRESS. THE VEHICLE IS CURRENTLY AT A DIFFERENT MECHANIC SHOP, WHICH DETERMINED THAT THE PROBLEM MAY BE WITH THE ABS SENSORS. *AK

We took the vehicle to Menway Chevrolet. They found corrosion on the Antilock Brake sensors. They cleaned the sensors and sprayed them with an anti-corrosion spray. Apparently there is a recall for this condition in Canada but not the U.S.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.
The Privacy Act of 1974-Public Law 93-502 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)

I have filed a complaint with GM, and my case number is: 1-381-114-008.

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

CINCINNATI OH 452

20 DEC 2005 PM 7 L



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

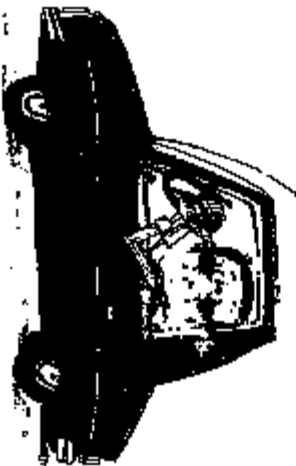
DASH2DOT and dial toll free at

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