



U.S. Department of Transportation

National Highway Traffic Safety Administration

Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS

888-327-4236

www.safercar.gov

FOR AGENCY USE ONLY	
Date Received 3-20-06	Repository <input type="checkbox"/>
Reference No. 10150853	

OWNER INFORMATION (Type or Print)

Name [REDACTED]			Daytime Telephone Number [REDACTED]	
Street No. [REDACTED]		Apt. No. [REDACTED]		
City Gladstone	State N.J.	Zip Code [REDACTED]		
E-mail [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 authorization, NHTSA will report to the vehicle manufacturer only during a defect investigation or when you make a complaint about recall performance on your vehicle.

Signature of Owner **[REDACTED]** Date **3/13/06**

VEHICLE INFORMATION

17 digit Vehicle Identification number located at bottom of windshield on driver's side 16KFK66U115 [REDACTED]				Make GMC	Model Yukon Denali XL	Year 2001	Current Mileage 65,000
Date Purchased 5-28-03	Dealer's Name and Telephone Number McQuire Pontiac GMC			Engine:	Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid		
<input type="checkbox"/> Original Owner	Dealer's City Little Falls	State NJ	Zip Code 07734	No. Cylinders 8	<input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other		
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic		Antilock Brakes <input checked="" type="checkbox"/> Cruise Control <input checked="" type="checkbox"/>		Powertrain <input checked="" type="checkbox"/> All-Wheel Drive <input type="checkbox"/> Rear-Wheel Drive <input type="checkbox"/> Front-Wheel Drive <input type="checkbox"/> Four-Wheel Drive			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component Name Transmission & cooling seal	Incident Date(s)	Failure Mileage	Failure Speed 5-10 mph	Failure Location <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Front <input type="checkbox"/> Rear
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make/Brand	Tire Model/Line	Tire Name	Tire Size (Example: P215/65R1105)
Failed Structure <input type="checkbox"/> Tread <input type="checkbox"/> Sidewall <input type="checkbox"/> Bead			DOT No. (Example: DOT MAL9ABC036 on sidewall) <input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair
Failure Type: <input type="checkbox"/> Blowout <input type="checkbox"/> Blister <input type="checkbox"/> Crack <input type="checkbox"/> Torn <input type="checkbox"/> Tread Separation <input type="checkbox"/> Road Hazard <input type="checkbox"/> Out of Round			

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make	Date Manufactured	Model Number and Name
Seat Type <input type="checkbox"/> Infant <input type="checkbox"/> Booster <input type="checkbox"/> Integrated <input type="checkbox"/> Convertible <input type="checkbox"/> Other		Installed in Vehicle using the: <input type="checkbox"/> Vehicle safety belt <input type="checkbox"/> LATCH system* <small>*Vehicle info required</small>
Failed Part. Describe Failure Below <input type="checkbox"/> Base <input type="checkbox"/> Harness/Buckle <input type="checkbox"/> LATCH Connector <input type="checkbox"/> Shell <input type="checkbox"/> Handle <input type="checkbox"/> Other		

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Police Report No.
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). **I can provide police & fire department reports of 1st defect, (seal on gas module) which leaked gas all over parking lot. The next safety issue is the transmission. A seal failed because of rough shifting. While driving the truck the trans failed completely. IT eventually failed completely, leaving my family in the middle of traffic with a tractor trailer bearing down on us. IT is a very serious situation when you cant move a car out of harms way.**

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7882

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I contacted the Dealer Salerno - Duane Auto group while still under warranty. I also had them check it, as did their other Dealer in Randolph N.J. Neither Dealer repaired or took care of the problem. There are many notices on the internet talking about these transmissions failing. It's a very serious problem that has to be addressed. If it fails at a Intersection in heavy traffic someone is going to get killed. Please, Please take A serious look at this. I can't explain how scary our situation was. It is life threatening!

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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

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13 MAR 2006 PM 3

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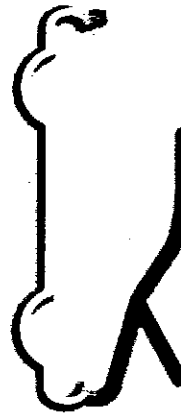
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U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590



Think your vehicle has a safety defect?



Yes!

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