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
2006 APR -6 AM 8:35 20-MAR-2006	Reference No. 10163221

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
[redacted]	[redacted]	[redacted]
Address [redacted]	Evening Telephone Number	
City TUCSON	State AZ	Zip Code [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 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	Make	Model	Model Year
1GBFG15R2V1103140	CHEVROLET	EXPRESS	1997

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
01-NOV-03				No. Cylinders 8	Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☐ Antilock Brakes ☒ Cruise Control	Powertrain: REAR WHEEL DRIVE	191000 TIRES:TREAD/BELT Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
13-FEB-2006	67000	75

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
GOODYEAR	EAGLE	P255/70R15

DOT No. (Example: DOTMAL9ABC036)		
	☐ Original Equipment Prior Repair	Failure Location: DRIVER SIDE FRONT

Tire Component Code	Tire Failure Type
191000 TIRES:TREAD/BELT	BLOWOUT

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), Fatality(ies), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 WHILE TRAVELING 75 MPH, THE FRONT DRIVER SIDE TIRE BLEW OUT. THE VEHICLE WAS PULLED OVER INTO THE MEDIAN AND THE TIRE WAS CHANGED. TWO HUNDRED MILES LATER, THE PASSENGER SIDE REAR TIRE BLEW OUT. THE VEHICLE WAS PULLED OVER TO THE SHOULDER AND THE TIRE WAS REPLACED. THE TIRES WERE SENT TO THE MANUFACTURER WHICH DETERMINED THE BLOWOUTS WERE A RESULT OF ROAD HAZARDS. BUT THERE WERE NO CHUCK HOLES OR FOREIGN MATERIAL ON THE ROADWAY. IT APPEARED TO BE TIRE FAILURE DUE TO TREAD SEPARATION. IN BOTH CASES, VEHICLE OWNER IS TAKING GOODYEAR TO COURT TO RECOVER APPROXIMATELY $1000.00 IN VEHICLE DAMAGE CAUSED BY THE TIRE FAILURES.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY