



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

MAY 15 10 08:39
17-MAY-2006

Reference No.
10157725

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City TRINITY State NC 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
1GKDT13564 _____
Make GMC Model ENVOY Model Year 2004
Date Purchased 01-FEB-04 Dealer's Name and Telephone Number FLOW PONTIAC GMC UNKNOWN Engine: No. Cylinders 6 Fuel Type: Gas
Original Owner Dealer's City WINSTON-SALEM State NC Zip Code _____
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 180000 VEHICLE SPEED CONTROL
Multiple Failure: ① (3 total)

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 04-MAY-2006 Failure Mileage 34000 Failure Speed 25

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make _____ The Model (Name or Number) _____ Tire Size (Example P215/65R15) _____
DOT No. (Example: DOTM1A9ABC036) 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), crash(es), 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).

DT*: THE CONTACT STATED WHILE EXITING THE OFF-RAMP OF THE HIGHWAY AT 20-25MPH, THE CHECK ENGINE AND REDUCED POWER LIGHT ILLUMINATED AND THERE WAS A LOSS OF ALL VEHICLE POWER. ALTHOUGH THE ENGINE RESTARTED AFTER SEVERAL ATTEMPTS, THE VEHICLE WAS TOWED TO THE DEALER FOR INSPECTION. THE DEALER DETERMINED THE ACCELERATOR SENSOR NEEDED TO BE REPLACED. AFTERWARDS, THE LOSS OF POWER PERSISTED AND THE ACCELERATOR SENSOR WAS AGAIN REPLACED BY THE DEALER AS WELL AS THE COMPUTER. ADDITIONALLY, THE HORN INTERMITTENTLY WORKED, BUT THE HORN WAS NOT INSPECTED.

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)

This same accelerator sensor failed at 19,000 miles in 05. The vehicle again shut down in the same manner. The incident happened again in April 06, 31,000 miles and the vehicle shut down. The vehicle has been towed in three times for the same type of electrical malfunction. It's really hard to trust the vehicle any more.

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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-210
400 7th Street, SW
Washington, DC 20590



Think your vehicle has a safety defect?



If you

see a problem with your vehicle, call the NHTSA's toll-free 24-hour hotline at 1-800-427-4288 or visit us online at www.safercar.gov



Vehicle Defects Questionnaire (VOC)
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