



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 OCT -4
 25-AUG-2006

Repository

2-15
 Reference No.
 10166523

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City GREEN BAY

State WI

Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

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 ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
 1GCCS19X5VK [REDACTED]

Make
 CHEVROLET

Model
 S-10

Model Year
 1997

Date Purchased
 01-FEB-05

Dealer's Name and Telephone Number
 KEN DRUDE CHEVROLET GANDRA CHEVROLET

Engine:
 No: Cylinders 6

Fuel Type:
 Gas

Original Owner

Dealer's City
 GREEN BAY

State
 WI WI

Zip Code

Transmission Type
 AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain
 REAR WHEEL DRIVE

Vehicle Component Code
 162510 STRUCTURE:BODY:TAILGATE:HINGE AND ATTACHMENTS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
 25-AUG-2006

Failure Mileage
 72000

Failure Speed
 NA

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

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 LOWERING THE TAILGATE, IT WAS NOTICED THE PASSENGER SIDE CABLE FRACTURED. THE VEHICLE HAS NOT BEEN SEEN BY A MECHANIC. *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 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)

THE TAILGATE CABLES ON THE 2000 S-10'S WERE RECENTLY RECALLED FOR THIS EXACT SAME PROBLEM AND THEY ARE THE PART NUMBERED ITEM THAT IS ALSO ON MY 1997 S-10. WHY WERENT ALL VEHICLES WITH THIS CABLE INSTALLED ON RECALLED. THIS IS A SAFETY ISSUE AS ANY TAILGATE LOAD COULD FALL AND INJURE PEOPLE AND/OR DAMAGE THE VEHICLE. PLEASE ADDRESS THIS ISSUE NOW. I HAVE NOTICED THAT MANY OTHER FOLKS HAVE REPORTED THIS IDENTICAL PROBLEM ON YOUR WEB-SITE!

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

GREEN BAY WI 543

12 SEP 2006 PM 1 L

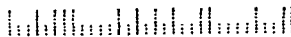
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

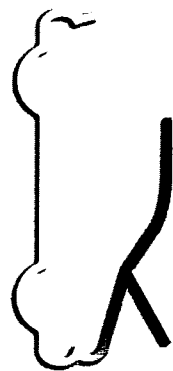
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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 so:
Use the enclosed form to file a report.**

**or visit:
www.safercar.gov
or call:
Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration