



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 PM 2:15
29-AUG-2006
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OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: DOUGLASVILLE State: GA 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 authorization, provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 9/18/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 2CNDL73F756 [Redacted]
Make: CHEVROLET Model: EQUINOX Model Year: 2005
Date Purchased: 01-MAY-05 Dealer's Name and Telephone Number: Jay Chevrolet 248-889-3232
Original Owner: Dealer's City: Highland State: MI Zip Code: 48357
Engine: No: Cylinders 6 Fuel Type: Gas
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: ALL WHEEL DRIVE
Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING
Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 01-MAY-2005 Failure Mileage: 3000 Failure Speed: 60

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: DOTM19ABC036): [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), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: 0 Number of Deaths: 0 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 DRIVING AT VARIOUS SPEEDS, THE VEHICLE STALLED WITHOUT WARNING. THE VEHICLE RESTARTED AND WAS PLACED IN DRIVE, HOWEVER DID NOT MOVE. THE VEHICLE WAS TOWED TO A DEALERSHIP WHO WAS UNABLE TO DETERMINE THE CAUSE OF THE FAILURE. ALSO, THE VEHICLE SHOOK WHILE DRIVING OVER 60 MPH AND WHEN THE BRAKES WERE APPLIED, THE DEALERSHIP REPLACED THE TIRES TWICE, ROTATED, AND BALANCED THE TIRES IN AN EFFORT TO CORRECT THE PROBLEM. THE DEALERSHIP ALSO REPLACED THE RIMS, WHEELS, AND HUBS, HOWEVER THE PROBLEM PERSISTED. IN ADDITION, THE AIR CONDITIONER UNIT FELL OFF THE BRACKET WHICH CAUSED THE ENGINE TO SHUT DOWN. THE VEHICLE WAS TOWED TO THE DEALERSHIP.

9/18/06 Picked vehicle up from Airport Chev dealership. I am very scared to drive this vehicle, I believe it is unsafe.

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 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.