



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
2007 FEB 27 AM 9:40
26-DEC-2006

Repository
Reference No.
10176999

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City PORTHE Portage State MI Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]
Evening Telephone Number [REDACTED]

E-mail Address [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an address to the vehicle manufacturer. YES NO
Signature of Owner [REDACTED] Date 2/5/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1GNDT13S322 [REDACTED] Make CHEVROLET Model TRAILBLAZER Model Year 2002
Date Purchased 01-MAR-04 Dealer's Name and Telephone Number KALAMAZO CHRISTIAN CARCO (See Lewright) Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner Dealer's City KALAMAZOO State MI Zip Code 49007
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain UNKNOWN
Vehicle Component Code 103000 POWER TRAIN: AUTOMATIC TRANSMISSION
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 26-DEC-2006 Failure Mileage 55000 Failure Speed 35

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) 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 [REDACTED] Number of Deaths [REDACTED] 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).

TL* - WHILE DRIVING THE CONTACT STATED THAT VEHICLE SEEMED TO SHIFT INTO NEUTRAL AND HE COULDN'T GET IT TO GO FASTER THAN 25 MPH. THE CONTACT HAS HAD THE TRANSMISSION REPAIRED ONCE BEFORE. *AK

The transmission has gone out twice due to the same problem in transmission. out of pocket cost \$4500.00

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.

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

in 2004 we purchased a 2002 Chevy Trailblazer LS.
In 2005 while pulling out of a driveway starting to accelerate
the transmission went out. The cost was \$1,800.00 to get fixed.
In 2006 while driving onto a busy road about 35 miles per hour
accelerating to a rate for a 50 mph zone the transmission
went out again. I was able to get the car home about
1 mile away to have towed to a garage. It was
fixed (new transmission) for \$2,900. to avoid
I was able to get to a side street ~~before~~ being hit by
approaching vehicles

ATTACH ADDITIONAL SHEETS IF NECESSARY

DOT
NATIONAL HIGHWAY
TRAFFIC SAFETY ADM
400 7TH ST SW
WASHINGTON DC 20590

OFFICIAL BUSINESS



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

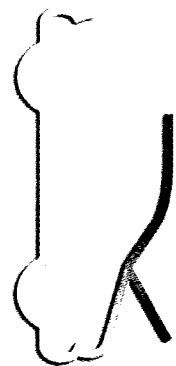
BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE

US DEPARTMENT OF TRANSPORTATION
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION
OFFICE OF DEFECTS INVESTIGATION, NVS-210
400 7TH ST SW
WASHINGTON DC 20077-8214



**Think your vehicle
has a safety defect?**



If so:

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

or visit:

www.safecar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



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