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 ☐
10-APR-2007	Reference No. 10187448

OWNER INFORMATION (Type or Print)

Name [redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		
City FLEETWOOD / State PA / Zip Code [redacted]	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 [redacted] Date 4/15/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCEK19V31E[redacted]	CHEVROLET	SILVERADO 1500	2001

Date Purchased	Dealer's Name and Telephone Number			Engine	Fuel Type
19-AUG-01	HAMES Chevy - 610-323-5100			No: Cylinders 8	Gas
Original Owner ☒	Dealer's City Pottstown, PA.	State PA	Zip Code 19464		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain: 4 WHEEL DRIVE	036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK Multiple Failure: 10

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
16-FEB-2007	69000	5

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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*THE CONTACT OWNS A 2001 CHEVROLET SILVERADO 1500. WHILE DRIVING 5 MPH THE ABS ACTIVATED WHEN THE BRAKE PEDALWAS DEPRESSED AND THE VEHICLE FAILED TO STOP. THE ROAD CONDITIONS WERE CLEAR. THE DEALER HAD NOT INSPECTED THE VEHICLE. THERE WAS RECALL # 05V379000 CONCERNING THE ANTILOCK BRAKES. PRIOR TO THE FAILURE THE VEHICLE WAS INSPECTED AND REPAIRED UNDER THE RECALL. THE CONTACT SPOKE WITH A GENERAL MOTORS REPRESENTATIVE, WHO STATED THAT THE DEALER WOULD BE UNABLE TO INSPECT OR REPAIR THE VEHICLE AGAIN. THE CURRENT AND FAILURE MILEAGE WERE 69,000.*AK

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

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

Would like GM to fix the

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

OFFICIAL BUSINESS

READING PA 196
18 APR 2007 PM 1 L

American Red Cross

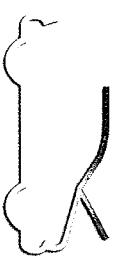
NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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.safercar.gov

or call:
Vehicle Safety Hotline
888-327-4236

www.nhtsa.gov
NHTSA

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