



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

02-AUG-2007  
 2007 SEP 12 AM

Reference No.  
 8:03  
 1018251

**OWNER INFORMATION (Type or Print)**

Name   
 Address   
 City COATESVILLE State PA Zip Code

Daytime Telephone Number   
 Evening Telephone Number   
 E-mail Address

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  
 1GNFK16U16J

Make CHEVROLET Model SUBURBAN 1500 Model Year 2006

Date Purchased 01-MAR-06 Dealer's Name and Telephone Number Engine: No: Cylinders 8 Fuel Type: Gas

Original Owner  Dealer's City State Zip Code

Transmission Type  AUTOMATIC Antilock Brakes  Powertrain 4 WHEEL DRIVE Vehicle Component Code 133000 VISIBILITY:POWER WINDOW DEVICES AND CONTROLS  
 Cruise Control  Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 01-AUG-2007 Failure Mileage 18000 Failure Speed 0

**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 Failure Location:  Prior Repair

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 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).

TL\*THE CONTACT OWNS A 2006 CHEVROLET SUBURBAN 1500. WHEN THE CONTACT SHUT OFF THE VEHICLE AND CLOSED THE DOOR, SHE NOTICED THAT THE CHILD'S HEAD WAS WEDGED AND STUCK IN THE WINDOW. THE CHILD WAS SEATED IN THE REAR SEAT. HIS HEAD WAS COMPLETELY OUT OF THE VEHICLE. THE CONTACT QUICKLY RAN TO RESTART THE VEHICLE AND ROLL THE WINDOW DOWN. SHE BELIEVES THAT THE WINDOW SHOULD HAVE A SENSOR TO PREVENT A CHILD OR ANYONE ELSE FROM BECOMING STUCK WHILE THE WINDOW IS ROLLING UP. THE FUEL SYSTEM WAS UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE 18,000.

My child (5 yrs) was unable to talk. His face was bright red with veins bulging on side of head. This all in a matter of seconds. Thank you for your time!

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.