



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

11-SEP-2007
2007 OCT -3 AM

Repository

Reference No.
81026525

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City PEMBROKE PINES

State FL

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 information to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA will not release this information or address to the vehicle manufacturer.
Signature of Owner _____ Date 2/18/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1GNEC16Z44J [REDACTED]

Make
CHEVROLET

Model
SUBURBAN

Model Year
2004

Date Purchased
01-MAR-04

Dealer's Name and Telephone Number
MAROONE

Engine:
No: Cylinders 8

Fuel Type:
Gas

Original Owner

Dealer's City
PEMBROKE PINES

State
FL

Zip Code
33025

Transmission Type
AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain
REAR WHEEL DRIVE

Vehicle Component Code
120300 EXTERIOR LIGHTING

Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
02-MAR-2004

Failure Mileage
15000

Failure Speed

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

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).

LEFT FRONT PARKING LIGHT KEEPS GOING OUT. I SEE OTHER VEHICLE, SAME MAKE AND MODEL WITH THE SAME PROBLEM. THE LIGHT HOUSING IS NOT SEALED. *JB

changed the bulb, keeps going bad

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.