



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

06-FEB-2008

AM 8:26

Repository

Reference No.  
10217137

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]

Address [REDACTED]

City CASTALLIA

State OH

Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address

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 \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
1GNEK13R6 [REDACTED]

Make  
CHEVROLET

Model  
TAHOE

Model Year  
2000

Date Purchased  
28-JAN-07

Dealer's Name and Telephone Number  
J & R MOTORS

Engine:  
No: Cylinders 8

Fuel Type:  
Gas

Original Owner

Dealer's City  
FREEMONT

State  
OH

Zip Code

Transmission Type  
AUTOMATIC

Antilock Brakes  
 Cruise Control

Powertrain  
4 WHEEL DRIVE

Vehicle Component Code  
036500 SERVICE BRAKES, HYDRAULIC:ANTILOCK:WHEEL SPEED SEN

Multiple Failure: 6

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

Incident Date(s)  
21-DEC-2007

Failure Mileage  
88000

Failure Speed  
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: 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).

TL\*THE CONTACT OWNS A 2000 CHEVROLET TAHOE. IN AN ATTEMPT TO PARK THE VEHICLE AT 5 MPH, THE CONTACT DEPRESSED THE BRAKE PEDAL, BUT THE VEHICLE WOULD NOT STOP. THE BRAKES HAD TO BE APPLIED AGAIN IN ORDER TO STOP THE VEHICLE. THE VEHICLE WAS TAKEN TO THE DEALER. THE CONTACT DISCOVERED NHTSA CAMPAIGN ID NUMBER 05V379000 (SERVICE BRAKES, HYDRAULIC:ANTILOCK), WHICH RELATES EXACTLY TO THE FAILURE. THE CURRENT MILEAGE WAS 90,000 AND FAILURE MILEAGE WAS 88,000.

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)**

MY VEHICLE ANTI-LOCK BRAKES MALFUNCTION EXACTLY AS DESCRIBED  
IN YOUR RECALL FOR 2000 CHEVY TANGERS (VEHICLE COMPONENT CODE 036500 )  
TOOK TO DEALER AND WAS TOLD MY VIN # DIDN'T FALL WITHIN  
THE RECALL, MY VEHICLE IS TITLED IN OHIO AND SINCE THIS  
IS A SALT ENTRY PROBLEM PERHAPS THIS VEHICLE WAS FIRST PUT IN  
SERVICE OUTSIDE THE RECALL STATES? - SINCE IT IS IN OHIO NOW SHOULDN'T  
IT BE COVERED? OR MAYBE YOU NEED TO RECALL MORE VIN #  
VEHICLES BEYOND THE INITIAL RECALL BECAUSE MY VEHICLE IS UNSAFE  
LIKE OTHER VIN #S ALREADY RECALLED

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department  
of Transportation

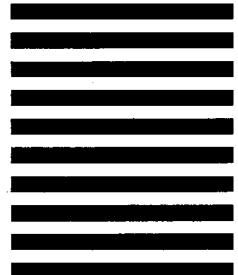
**National Highway  
Traffic Safety  
Administration**

1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382

Official Business  
Penalty for Private Use \$300



**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  
1200 New Jersey Ave SE  
Washington, DC 20077-9382**



MANSFIELD OH 449

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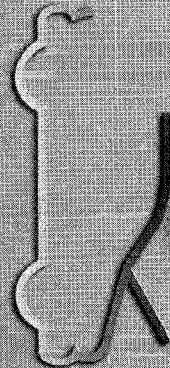
"LET US DARE TO READ

THINK, SPEAK AND

John Adams, 17

power of the

**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**



Vehicle Owners' Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration

