 <b>DOT Auto Safety Hotline</b> U.S. Department of Transportation <b>National Highway Traffic Safety Administration</b>		<b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148 Date Received: 2008 JUL 11 3 AM 9:53 Repository <input type="checkbox"/> Reference No. 10230745	
<b>OWNER INFORMATION (Type or Print)</b>					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City	State	Zip Code			
JACKSON	NJ				
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of an authorized address to the vehicle manufacturer.					
Signature of Owner			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Date 6/16/08
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side.		Make	Model	Model Year	
2G1WD58C271		CHEVROLET	IMPALA	2007	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
6/07	VINE BERT CHAN 732-462-1576		No: Cylinders	GAS	
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code		
	FREEHOLD NJ	NJ			
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Vehicle Component Code		
Auto	<input checked="" type="checkbox"/> Cruise Control		060000 ENGINE AND ENGINE COOLING		
Multiple Failure:					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Incident Date(s)	Failure Mileage	Failure Speed	@ 2000 RPM		
04 JUN 2008	12500	40			
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:	
Tire Component Code				Tire Failure Type	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
<b>APPLICABLE INCIDENT INFORMATION</b> (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	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	N	
<b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b> 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 2007 CHEVROLET IMPALA. WHILE DRIVING APPROXIMATELY 40 MPH AT 2,000 RPM, THE CONTACT RELEASED THE ACCELERATOR PEDAL AND THE RPM IMMEDIATELY INCREASED. OCCASIONALLY, THE RPM WILL REMAIN THE SAME WHEN PRESSURE IS RELEASED FROM THE ACCELERATOR PEDAL. AFTER THE FAILURE OCCURS, THE VEHICLE WILL CONTINUE TO ACCELERATE FOR A FEW SECONDS. AFTER A PERIOD OF TIME, THE RPM'S WILL RETURN TO NORMAL. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER, BUT THEY COULD NOT DETERMINE THE CAUSE OF THE FAILURE. THE MECHANIC STATED THAT THERE WAS NOT A SOLUTION TO CORRECT THE FAILURE. THE VEHICLE HAS NOT BEEN REPAIRED. THE FAILURE MILEAGE WAS 12,500 AND CURRENT MILEAGE WAS 14,900.					
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)

THE CONDITION IS NON-DRIVER CONTROLLED ACCELERATION.

VERY DANGEROUS

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

TRENTON NJ 086

30 JUN 2005 PM 3

LET US CARE TO READ, THINK, SPEAK AND WRITE.

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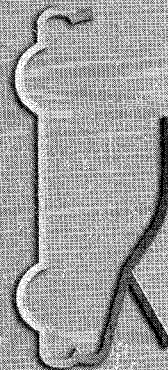
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US Department of Transportation National Highway Traffic Safety Administration Office of Defects Investigation, NVS-210 1200 New Jersey Ave SE Washington, DC 20077-9382



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

