

 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 15-APR-2009		Repository <input type="checkbox"/> Reference No. 10265433	
		OWNER INFORMATION (Type or Print) Name _____ Address _____ City CLARKSVILLE State TN 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? In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.	
Signature of Owner _____ Date 4/22/09		VEHICLE INFORMATION 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2CNDL13F456 _____					
Date Purchased _____ Original Owner <input type="checkbox"/>		Dealer's Name and Telephone Number Ken Nelson Auto Plaza 815-288-4455 Dealer's City Dixon State IL Zip Code 61021		Model CHEVROLET Model EQUINOX Model Year 2005		Engine: _____ No. of Cylinders _____ Fuel Type: _____	
Transmission Type Automatic <input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		Powertrain _____ Multiple Failure: _____		Incident Date(s) 30-MAR-2009		FAILED COMPONENT(S)/PART(S) INFORMATION Vehicle Component Codes: 141000 AIR BAGS: FRONTAL, 030000 SERVICE BRAKES, HYDRAULIC	
Tire Make _____ DOT No. (Example: DOTM19ABC036)		Tire Model (Name or Number) _____ <input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Tire Size (Example P215/65R15) _____ Failure Location: _____		Failure Mileage 47000 Failure Speed 70	
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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured 1		Number of Deaths 0		Reported to Police Y	
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 2005 CHEVROLET EQUINOX. WHILE DRIVING 70 MPH, THE CONTACT ATTEMPTED TO AVOID A CRASH AND THE BRAKES FAILED. SHE CRASHED INTO A CEMENT OVERPASS AND THE AIR BAGS FAILED TO DEPLOY. PRIOR TO THE INCIDENT, THE CONTACT NEVER EXPERIENCED ANY BRAKE SYSTEM FAILURE. HE FEELS THAT THE ABS FAILED AND CAUSED THE BRAKE SYSTEM TO FAIL. THE DRIVER SUSTAINED BRUISED RIBS AND LACERATIONS TO THE FOREHEAD. A POLICE REPORT WAS FILED. THE VEHICLE WAS TOWED TO THE INSURANCE LOT FOR FURTHER INSPECTION, BUT THE INSURANCE ADJUSTER WAS UNABLE TO DETERMINE THE CAUSE OF THE FAILURE. THE VEHICLE WAS DESTROYED. THE CONTACT IS IN THE PROCESS OF NOTIFYING THE MANUFACTURER. THE FAILURE MILEAGE WAS 47,000.							
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.							