DEC 8 2009

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 ☐
29-OCT-2009	Reference No. 10290273

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	
City: RICEVILLE	State: TN	Zip Code:	

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
2G1WF52E73	CHEVROLET	IMPALA	2003

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Dec-2002	Athens Chevrolet - Don Hedford Auto Fam			6	GAS
Original Owner ☑	Dealer's City: ATHENS	State: TN	Zip Code: 37303		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
automatic	☑ Antilock Brakes ☑ Cruise Control		Starting	20-OCT-2009 2 in 07 2 in 08 5 Times in Sept. Oct 09

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM car will not start	Failure Mileage	Failure Speed
	50651	

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 2003 CHEVROLET IMPALA. ~~INTERMITTENTLY WHEN SHIFTING INTO THE DRIVE GEAR~~, THE VEHICLE WILL STALL WITHOUT WARNING. THE VEHICLE WAS TAKEN TO THE DEALERSHIP FOR INSPECTION. SINCE THE DEALER COULD NOT DUPLICATE THE FAILURE, THEY COULD NOT PROVIDE A REMEDY. THE CURRENT AND FAILURE MILEAGES WERE 50651. After car is driven and stoped at times the car will not start. it will turn over but will not start this has happened 2 Times in 2007 - 2 Times in 2008 and 5 times in september and October of 2009 - we are always afraid it won't start. we have had this car towed in at least 4 times. This car can't be trusted to start

Towed

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

To Whom it May Concern:

My Wife + I are both in bad health. All of our doctors are out of town (over 50 miles away) so we need to be able to trust our car. When the car won't start it just puts more stress on our health.

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 Avenue SE.
Washington, D.C. 20077-9382