

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 NOV 22 2010 30-AUG-2010	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City	State	Zip Code			
SOUTH PARK	PA				
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
1GTC5148668			GMC	CANYON	2005
Date Purchased	Dealer's Name and Telephone Number		Engine: 2.8L	Fuel Type:	
12-27-2005	BOWSER 412-469-2100		No: Cylinders 4	GASOLINE	
Original Owner	Dealer's City	State	Zip Code		
☒	PICASANT HILLS	PA	15236		
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)
4 speed Automatic	☐ Cruise Control	Vortec 2800 14 ENGINE	ANTILOCK BRAKES.		16-AUG-2010
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 030000 SERVICE BRAKES, HYDRAULIC, 036000 SERVICE BRAKES, HYDRAULIC: ANTILOCK				Failure Mileage	Failure Speed
				24994	10
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	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 2005 GMC CANYON. WHILE DRIVING APPROXIMATELY 10 MPH PRESSURE WAS APPLIED TO THE BRAKE PEDAL AND THE PEDAL BEGAN TO SEVERELY PULSATE. IT TOOK AN INCREASED DISTANCE IN ORDER TO STOP THE VEHICLE. AN ABS FAULT LIGHT ILLUMINATED ON THE DASHBOARD. THE FAILURE HAS SINCE RECURRED INTERMITTENTLY. THE VEHICLE WAS NOT TAKEN TO BE EXAMINED FOR THE CAUSE OF FAILURE AND WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 24,994 AND THE CURRENT MILEAGE WAS 25,010.					
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.					