

 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 05-APR-2011 MAY 02 2011	Repository <input type="checkbox"/>
OWNER INFORMATION (Type or Print)				Reference No. 10394273	
Name		Address		Daytime Telephone Number	E-mail Address
City LANCASTER		State KY	Zip Code	Evening Telephone Number	
<i>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).</i>					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1GNDX03E61D			Make CHEVROLET	Model VENTURE	Model Year 2001
Date Purchased 8-31-10	Dealer's Name and Telephone Number Liberty Auto sales			Engine: 3100 No: Cylinders 6	Fuel Type: Gas
Original Owner <input type="checkbox"/>	Dealer's City Lexington		State KY	Zip Code 40511	
Transmission Type Auto	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure:		Incident Date(s) 31-MAR-2011
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 070000 FUEL SYSTEM, GASOLINE				Failure Mileage 160000	Failure Speed 0
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: DOTM9ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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					
<i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i>					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Deaths	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 2001 CHEVROLET VENTURE. THE VEHICLE WAS PARKED AND SHUT OFF FOR A LONG PERIOD OF TIME WHEN IT IGNITED INTO FLAMES. THE CONTACT STATED THAT THE FIRE BEGAN WHERE THE FUEL FILLER NECK WAS LOCATED. A POLICE REPORT WAS FILED AND THE FIRE DEPARTMENT APPEARED TO EXTINGUISH THE FIRE. THE VEHICLE WAS DESTROYED BUT WAS NOT INVESTIGATED FOR THE FAILURE. THE FAILURE AND CURRENT MILEAGE WAS 160,000.					
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 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 incident also burnt a 98 Dodge Ram 150 totaled & melted the rear of a 98 Malibu tail light lens + bumper. The insurance co. said NO fault so it want cover

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**



**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