



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
JUN 17 2011
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Repository
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OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City NORTH WHITE PLAINS State NY Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]

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
1GNDT13S452 [REDACTED] Make CHEVROLET Model TRAILBLAZER Model Year 2005
Date Purchased [REDACTED] Dealer's Name and Telephone Number Major World 866-614-2884 Engine: No: Cylinders 6 Fuel Type: 999
Original Owner Dealer's City Long Island City State NY Zip Code 11101
Transmission Type [REDACTED] Antilock Brakes Powertrain Multiple Failure: Incident Date(s) 09-APR-2011
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 026000 TRACTION CONTROL SYSTEM, 100000 POWER TRAIN Failure Mileage 115000 Failure Speed 35

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]
DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash Yes No Fire Yes No Number of Persons Injured [REDACTED] Number of Deaths [REDACTED] Reported to Police 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 CHEVROLET TRAILBLAZER. WHILE DRIVING APPROXIMATELY 35 MPH, THE CONTACT LOST CONTROL OF THE VEHICLE, STRUCK ANOTHER VEHICLE AND SWERVED OFF OF THE ROAD. PRIOR TO THE CRASH, THE CONTACT HEARD A LOUD BANGING NOISE NEAR THE REAR END OF THE AXLE. THE FRONT DRIVE AXLE AND THE DRIVE TRAIN CONNECTED TO THE REAR AXLE WERE DESTROYED. THE VEHICLE WAS TOWED TO HIS RESIDENCE AND IT WAS NOT REPAIRED. THE MANUFACTURER STATED THAT THEY WERE UNABLE TO OFFER HIM ANY ASSISTANCE WITH THE FAILURE. A POLICE REPORT WAS NOT FILED. THE FAILURE MILEAGE WAS 115,000.

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.