

 <p>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</p>		FOR AGENCY USE ONLY 100148 Date Received JUL - 3 2011 06-JUN-2011		Repository <input type="checkbox"/> Reference No. 10405348
OWNER INFORMATION (Type or Print)				
Name		Daytime Telephone Number		E-mail Address
Address		Evening Telephone Number		
City	State	Zip Code		
FRISCO	TX			
<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		Make	Model	Model Year
1GKDS13S142		GMC SLT	ENVOY	2004
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
06/04/04	EDWING BUICK GMC 972-964-7400		No: Cylinders	REG
Original Owner	Dealer's City	State	Zip Code	
<input checked="" type="checkbox"/>	PLANO	TX	75093	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)
4-SPD-TRAY W/10D	<input checked="" type="checkbox"/> Cruise Control	2 WHEEL DRIVE 4 DOOR	YES	07-MAY-2011
FAILED COMPONENT(S)/PART(S) INFORMATION				
Vehicle Component Code: 180000 VEHICLE SPEED CONTROL			Failure Mileage	Failure Speed
			124000	50
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)	<input type="checkbox"/> Original Equipment	Failure Location:		
	<input type="checkbox"/> Prior Repair			
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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	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 2004 GMC ENVOY. THE CONTACT STATED WHILE DRIVING THE SPEEDOMETER DISPLAYED AN INCREASE IN SPEED OVER 125 MPH AND WHEN HE STOPPED THE VEHICLE THE GAUGE WOULD DISPLAY 50 OR 70 MPH. HE DOES NOT KNOW THE ACTUAL SPEED THAT HE WAS TRAVELING. THE MANUFACTURER STATED THE WARRANTY HAD EXPIRED AND THEY WILL NOT REPAIR THE VEHICLE. THE VEHICLE WAS NOT REPAIRED. THE DEALER WAS NOT CONTACTED REGARDING THE FAILURE. THE FAILURE MILEAGE WAS 124,000 AND THE CURRENT MILEAGE WAS 127,400.				
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.				