

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (EOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148	
		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		Date Received MAR 20 2012 20-DEC-2011	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		N/A
City	State	Zip Code	Same		
FORESTVILLE			NY		
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
1GKEL19XX4B			GMC	SAFARI	2004
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
6/2004	SAVENS AUTO SALES N/A		No: Cylinders	GAS	
Original Owner	Dealer's City	State	Zip Code		
	Angola	NY	14006		
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
AUTO	☒ Cruise Control	AWD		20-OCT-2011	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC				Failure Mileage	Failure Speed
				180000	3
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:		
Seal 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	0	0	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 SAFARI AWD. THE CONTACT WAS DRIVING APPROXIMATELY 3-5 MPH AND COMING TO A STOP WHEN THE ABS ACTIVATED ABNORMALLY AND CAUSED THE BRAKES TO PULSATE. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE THEY ADVISED THE CONTACT THAT THE HUBS NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 180,000.					
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 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.					

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

ABS Activates pulling into park place 3-5mph on Dry Surface.
on coming to stop at traffic light on stop sign.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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**



safercar.gov

**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