

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration	INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) 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 APR 27 2012 19-MAR-2012 Repository <input type="checkbox"/> Reference No. 10452205
OWNER INFORMATION (Type or Print)		
Name [REDACTED]		Daytime Telephone Number [REDACTED]
Address [REDACTED]		E-mail Address [REDACTED]
City LITTLE ROCK	State AR	Zip Code [REDACTED]
		Evening Telephone Number <i>Same</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).		
VEHICLE INFORMATION		
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1GNDM19W1WB [REDACTED]		Make CHEVROLET
Model Year 1998		Model ASTRO
Date Purchased <i>7-98</i>	Dealer's Name and Telephone Number <i>SWATNEY</i>	
Original Owner <input checked="" type="checkbox"/>	Dealer's City <i>JACKSONVILLE</i>	State <i>AR</i>
	Zip Code <i>72204</i>	Engine: No: Cylinders <i>6</i>
Transmission Type <i>Automatic</i>	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain
	<input type="checkbox"/> Cruise Control	Multiple Failure:
		Incident Date(s) 01-FEB-2012
FAILED COMPONENT(S)/PART(S) INFORMATION		
Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING		Failure Mileage 92349
<i>Computer failed. Run Hot Could have had a fire</i>		Failure Speed 40
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 <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 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 1998 CHEVROLET ASTRO VAN. THE CONTACT WAS DRIVING 40 MPH WHEN HEAT EMITTED INSIDE THE VEHICLE WITHOUT WARNING. THE CONTACT STATED THAT DURING THE FAILURE, THERE WERE NO VISIBLE FLAMES OR SMOKE. THE VEHICLE WAS TAKEN TO THE DEALER WHERE THE DEALER CONFIRMED THAT THE ENGINE WAS DAMAGED AND NEEDED TO BE REPLACED. THE MANUFACTURER WAS CONTACTED. THE VEHICLE WAS NOT REPAIRED. THE FAILURE AND CURRENT MILEAGES WERE 92,349. <i>the over heating engine could have started a fire and could have cause death</i>		
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.		