

 <p><b>DOT Auto Safety Hotline</b>  <b>Vehicle Owner's Questionnaire</b>          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 <b>MAY 11 2012</b> 13-APR-2012	Repository <input type="checkbox"/> Reference No. 10455130
<b>OWNER INFORMATION (Type or Print)</b>			
Name	[REDACTED]		Daytime Telephone Number
Address	[REDACTED]		E-mail Address
City	GREAT FALLS	State	MT
Zip Code	[REDACTED]		Evening Telephone Number
<p>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).</p>			
<b>VEHICLE INFORMATION</b>			
17-digit Vehicle Identification Number Located at bottom of windshield on driver's side 1GCES14PX48 [REDACTED]		Make CHEVROLET	Model SSR
Model Year 2004		Engine: No. Cylinders 8	Fuel Type: GAS
Date Purchased MAY 2004	Dealer's Name and Telephone Number City CHEVROLET 406 761 4900		
Original Owner <input checked="" type="checkbox"/>	Dealer's City GREAT FALLS	State MT	Zip Code
Transmission Type auto	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: Incident Date(s) 01-FEB-2012
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Vehicle Component Code: 150000 SEAT BELTS		Failure Mileage 20000	Failure Speed
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>			
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:		
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>			
Make:	Date Manufactured:	Model No./Name:	
Seat Type:	Installation System:		
Child Seat Component Code:	Failed Part:		
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)			
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			
<p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b>          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).</p>			
<p>TL* THE CONTACT OWNS A 2004 CHEVROLET SSR. THE CONTACT STATED THAT ONE OF THE SEATBELTS HAD BECOME INOPERABLE. THE CONTACT ORDERED A REPLACEMENT SEAT BELT BUT ONCE IT WAS RECEIVED, HE NOTICED THAT THE SEATBELT WAS ROLLED BACKWARD AND EXHIBITED AN ABNORMAL TWIST. THE MANUFACTURER WAS CONTACTED WHO ADVISED THAT THE SEAT BELT HAD TO BE INSTALLED BACKWARD IN ORDER FOR IT TO OPERATE CORRECTLY. THE VEHICLE WAS NOT REPAIRED. THE FAILURE AND THE CURRENT MILEAGE WAS 20,000.</p>			
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.</p>			
<p>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.</p>			

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

Plastic gear defective in mechanism. Ordered, bought, & installed replacement from City Chevrolet. Had a twist in lap area. Removed new belt. Found wound backward from original. Returned to city parts department. They agreed it was wound backward. Sent it to company & asked me to leave original belt also. 2 wks new belt arrived @ also wound backwards. This time @ diagram from Chevrolet showing installation backwards from original resulting in twist over lap when used. Definite fraud. Owner of city Chevrolet has ignored my letter for comment. (Side note - 9000 new miles on odometer because air bag electrical on belt. Instrument panel said check seat belt during this period)

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

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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**

**\*\*\*\*\*  
NHTSA  
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Vehicle Owner's Guide to Reporting Defects  
U.S. Department of Transportation  
National Highway Traffic Safety Administration


