

INFORMATION Redacted PURSUANT TO THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

EQ-10490862-1091

From: [Wells, Cynthia CTR \(NHTSA\)](#)
To: [Nelson, Carla CTR \(NHTSA\)](#)
Subject: FW: Message from KMBT_421
Date: Tuesday, August 27, 2013 11:19:05 AM
Attachments: [SKMBT_42113082311110.pdf](#)

From: Williams, Maritza CTR (NHTSA) **On Behalf Of** DataQuality, DataQuality (NHTSA)
Sent: Monday, August 26, 2013 1:50 PM
To: Wells, Cynthia CTR (NHTSA)
Subject: FW: Message from KMBT_421

Hi Cynthia,

Attached the consumer is updating their ODI file. The questionnaire is attached as well.

Maritza L. Marshall-Williams
BLF Technologies Inc.
on assignment with National Highway Traffic
Safety Administration, Dept. Of Transportation
W48-204
maritza.williams.ctr@dot.gov
Ph: 202-493-0317
Fax: 202-366-3081

From: [REDACTED]
Sent: Friday, August 23, 2013 2:36 PM
To: DataQuality, DataQuality (NHTSA)
Subject: FW: Message from KMBT_421

I am attaching information in regards to the report I filed earlier this year.

[REDACTED]

Date: 08/23/2013 11:29AM
Subject: Message from KMBT_421

(See attached file: SKMBT_42113082311110.pdf)

RE ODI 10490862

Is my fuel pump covered by any recall.

I saw recall 2/28/11 NHTSA reference 11E009000 was for a fuel pump problem

Then NHTSA issued a recall in October 2012 for GM cars for faulty fuel pumps for vehicles in hot-climate states. The recall was for certain models but don't they put the same fuel pump in other models. Campaign 12V45900

I am sending a copy of my repair invoice for replacing the fuel pump.





U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE
Washington, DC 20590

Dear Consumer:

NVS-216rr

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failure(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief
Correspondence Research Division
Office of Defects Investigation
Enforcement

Enclosure: VOQ



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

03-JAN-2013

Repository ☐Reference No.
10490862**OWNER INFORMATION (Type or Print)**

Name

Address

City PHEONIX

State AZ

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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

1G1ZT68N87F

Make

CHEVROLET

Model

MALIBU MAXX

Model Year

2007

Date Purchased

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Multiple Failure:

Incident Date(s)

17-OCT-2012

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)

Failure Mileage

87660

Failure Speed

30

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:

Seat 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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

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 2007 CHEVROLET MALIBU MAXX. THE CONTACT STATED THAT WHILE DRIVING 30 MPH, SHE SMELLED GASOLINE INSIDE OF THE VEHICLE. THE CONTACT STATED THAT SHE TOOK THE VEHICLE TO THE DEALER FOR INSPECTION WHERE THEY STATED THAT THE FUEL PUMP NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE AND STATED THAT THE VEHICLE DID NOT HAVE ANY OPEN RECALLS. THE FAILURE MILEAGE WAS 87,660.

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.

GREG CLARK

Automotive Specialists

5838 N. 19th Avenue Phoenix, AZ 85015

(602) 246-2881

INVOICE: 117301
COMPLETED: 10/30/12 12:45:13
ADVISOR: MIGUEL RODRIGUEZ
ACCOUNT #: 43946 Page: 1

INVOICE FOR SERVICES

CUSTOMER: [REDACTED]
ADDRESS: [REDACTED]
CITY: PHOENIX, AZ [REDACTED]
HOME: [REDACTED]
BUSINESS: [REDACTED] e

LICENSE [REDACTED]
VEHICLE 07 CHEVROLET MALIBU
V.I.N. 1G1ZT68N87F [REDACTED]
MILES 87660
REF: NEW

The following parts were used when servicing your vehicle:

Quan.	Part #	Description	Charge	Extended
1.00	19179818 CC	FUEL PUMP ASSEMBLY	547.24	547.24
1.00	-----	-----	0.00	-----

The work performed, and the charges, are:

CUSTOMER WAS TOLD HAS POSSIBLE FUEL LEAK AT THE FILLER
NECK.-----

Technician: GREG

REMOVE FUEL TANK FROM VEHICLE, REMOVE DEFECTIVE INTANK TYPE
FUEL PUMP, REINSTALL NEW FUEL PUMP, REINSTALL FUEL TANK
BACK INTO VEHICLE, INSPECT FOR ANY FUEL LEAKS, REINSPECT
FUEL PUMP OPERATION.

262.77

Technician: GREG

The following recommendations are offered based on work performed:

AFTER THE INPSECTION WE FOUND THE LINE CONNECTOR IS
LEAKING, RECOMENDED THE SENDING UNIT, AND A.I.C. CUSTOMER
ONLY APPROVED THE FUEL PUMP, DECLINED THE SENDING UNIT, AND
A.I.C. WE DID ADVISED HER IF THE GUAGE FOR THE FUEL STARTS
TO READ INACCURATELY, LABOR TO REPLACE IT WILL BE THE SAME
AS THE PUMP.

The following revisions were made to the original estimate

On 10/30/12 at 10:13 MIGUEL contacted [REDACTED] @ [REDACTED]
\$ 893.00 was added to the estimate, for a new total of \$ 893.00
SPOKE WITH [REDACTED] OVER THE PHONE ADVISED HER ONT HE
REPAIRS FOR HER VEHICLE..SHE APPROVED \$893.00 O.T.D FOR THE
REPAIRS.

I acknowledge prior notification of the increased estimate cost and oral
consent to proceed with the work.

	Taxable	Non-tax	
Parts:	\$ 547.24		SUBTOTAL: \$ 822.01 TOTAL: \$ 893.87



GREG CLARK AUTOMOTIVE
5838 N. 19TH AVE
PHOENIX, AZ 85015
(602) 245-2881
MID #8788290266698

Merchant ID: 088290266698

Sale

6198

VISA

Entry Method: Swiped

Total: \$ 893.87

10/30/12

16:51:11

Inv# 000001

Appr Code: 057064

Apprvd: Online

Batch#: 000398

Customer Copy
THANK YOU!
COME AGAIN!