

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)				FOR AGENCY USE ONLY 100148	
 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		Date Received	Repository ☐
				23-JAN-2014	Reference No. 10561168
OWNER INFORMATION (Type or Print)					
Name				Daytime Telephone Number	E-mail Address
Address					
City	NEW CARLISLE	State	OH	Zip Code	
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
1GTZGFBA0A1		GMC	SAVANNA 2500		2010
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
12/31/10	Cobogen - 1-800-860-6673		No: Cylinders 8	Flex	
Original Owner ☒	Dealer's City	State	Zip Code		
Troy	OH				
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
Automatic	☒ Cruise Control	yes		13-JAN-2014	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: ENGINE (PWS)				Failure Mileage	Failure Speed
				32000	
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	Failure Location:			
	☐ 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					
(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 2010 GMC SAVANNA 2500. THE CONTACT STATED WHILE TRAVELING VARIOUS SPEEDS, THE VEHICLE SUDDENLY STALLED AND FIRE EMITTED FROM THE ENGINE COMPARTMENT. THE FAILURE WAS NOT DIAGNOSED NOR WAS THE VEHICLE REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 32,000.					
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.					