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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------------|
|  <p><b>DOT Auto Safety Hotline</b><br/> <b>Vehicle Owner's Questionnaire</b><br/> <b>To Report Vehicle Safety Defects</b><br/> <b>1-888-DASH-2-DOT</b><br/> <b>(1-888-327-4236)</b><br/> <b>INTERNET:www.nhtsa.dot.gov/hotline</b></p>                                                                                                                                                                                                                                                                     |                                                                                      | FOR AGENCY USE ONLY 100148                  |                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | Date Received<br>12-SEP-2014<br>OCT 22 2014 | Repository <input type="checkbox"/><br>Reference No.<br>10632715 |
| OWNER INFORMATION (Type or Print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      | Daytime Telephone Number                    | E-mail Address                                                   |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                      |                                             | NOEMATI@UNK.GOV                                                  |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                      | Evening Telephone Number                    |                                                                  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | IRVING                                                                               | State                                       | TX                                                               |
| Zip Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                      |                                             |                                                                  |
| <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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Make                                                                                 | Model                                       | Model Year                                                       |
| 1G1ZT54894F                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | CHEVROLET                                                                            | MALIBU                                      | 2004                                                             |
| Date Purchased                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Dealer's Name and Telephone Number                                                   | Engine: No: Cylinders                       | Fuel Type:                                                       |
| 12/09/2003                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | VAN CHEVROLET 214-242-5181                                                           |                                             | UNL                                                              |
| Original Owner <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Dealer's City                                                                        | State                                       | Zip Code                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Carrollton                                                                           | TX                                          | 75011                                                            |
| Transmission Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input checked="" type="checkbox"/> Antilock Brakes                                  | Powertrain                                  | Multiple Failure:                                                |
| AUTO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <input checked="" type="checkbox"/> Cruise Control                                   |                                             | Yes                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      |                                             | Incident Date(s)<br>01-MAR-2004                                  |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |                                             |                                                                  |
| Vehicle Component Codes: ENGINE (PWS), 010000 STEERING, BRAKES (PWS), 110000 ELECTRICAL SYSTEM, 121000 EXTERIOR LIGHTING: HEADLIGHTS, 114000 ELECTRICAL SYSTEM: WIRING                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                      | Failure Mileage                             | Failure Speed                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | 35,000                                      | ANY                                                              |
| <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<br><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><br>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |                                             |                                                                  |
| Crash<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          | Number of Persons Injured<br>0              | Number of Deaths<br>0                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | Reported to Police<br>N                     |                                                                  |
| <b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b><br>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>TL* THE CONTACT OWNS A 2004 CHEVROLET MALIBU. THE CONTACT STATED THAT THE BRAKES, STEERING, AND ELECTRICAL WIRING FOR THE HEADLIGHTS FAILED. THE FAILURES HAVE OCCURRED SINCE 2012. WHILE MAKING LEFT TURNS, THE STEERING WHEEL WAS DIFFICULT TO MANEUVER. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED THE CONTACT HAD BEEN SUBMITTING COMPLAINTS TO THE MANUFACTURER SINCE 2004. THE FAILURE MILEAGE WAS 50,000 / 35,000<br/>                 ↓<br/>                 2004</p>                                                                                                             |                                                                                      |                                             |                                                                  |
| Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      | ATTACH ADDITIONAL SHEETS IF NECESSARY       |                                                                  |
| <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)

All the problems I have been telling GM since 2004 are being recalled - Most of the problems have not been fixed AND speaking to GM has been exhausting, to say the least. They are rude, never call back when they say. This car would of been a lemon and is one. The problems began before 5,000 miles and I have told GM these problems since 2004.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

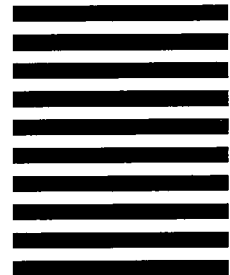
1200 New Jersey Avenue SE. Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



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02 OCT '14  
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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



Think your vehicle has a safety defect?



If so  
Use the enclosed form to file

or visit  
[www.safercar.gov](http://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