


DEC 01 2014

 <p><b>DOT Auto Safety Hotline</b>  <b>Vehicle Owner's Questionnaire</b>  <b>To Report Vehicle Safety Defects</b>  <b>1-888-DASH-2-DOT</b>  <b>(1-888-327-4236)</b>  <b>INTERNET:www.nhtsa.dot.gov/hotline</b></p>		FOR AGENCY USE ONLY 100148	
		Date Received 08-OCT-2014	Repository <input type="checkbox"/> Reference No. 10643334
<b>OWNER INFORMATION (Type or Print)</b>			
Name		Daytime Telephone Number	
Address		E-mail Address NOEMAIL@UNK.GOV	
City WINTER PARK	State FL	Zip Code	
<p><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).</i></p>			
<b>VEHICLE INFORMATION</b>			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1G1YY25W285		Make CHEVROLET	Model Year 2008
Date Purchased 28 DEC 2007	Dealer's Name and Telephone Number HOLLER CHEVROLET (NO LONGER IN BUSINESS)		Model CORVETTE
Original Owner <input checked="" type="checkbox"/>	Dealer's City WINTER PARK	State FL	Fuel Type: PREM
Engine: 6.2/376 No: Cylinders V-8	Zip Code 32789	Transmission Type STD 6-Speed MANUAL	Incident Date(s) 03-OCT-2014
<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	<input checked="" type="checkbox"/> Cruise Control	Multiple Failure:
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Vehicle Component Codes: LIGHTING (PWS), 121000 EXTERIOR LIGHTING: HEADLIGHTS		Failure Mileage 61200	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> <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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0
		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 2008 CHEVROLET CORVETTE. WHILE DRIVING AT NIGHT WITH THE HEADLIGHTS ACTIVATED, THE LOW BEAM LIGHTS FAILED. THE DEALER STATED THAT THE UBEC HOUSING FAILED AND CAUSED THE LOW BEAM RELAY CONTROL CIRCUIT TO FAIL. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS NOTIFIED. THE FAILURE MILEAGE WAS 61,200. COST TO REPAIR AT LOCAL CHEVROLET DEALER WAS \$655.21. MANUFACTURER REIMBURSED COST AS PART OF CUSTOMER SATISFACTION PROGRAM. PART NUMBER REPLACEMENT WAS 25954866.</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>			