

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

 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 11-DEC-2014		Repository ☐ Reference No. 10663640	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
JEWETT		OH		Same	
Zip Code		E-mail Address			
		None			
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	
1G1ZU53866F		CHEVROLET		MALIBU	
Model Year		Engine:		Fuel Type:	
2006		No: Cylinders			
Date Purchased		Dealer's Name and Telephone Number			
		<i>Don Brown</i> <i>Don Brown</i>			
Original Owner		Dealer's City		State	
☐		Cady		Ohio	
		Zip Code		43907	
Transmission Type		Antilock Brakes		Incident Date(s)	
		☐		11-DEC-2014	
Cruise Control		☐			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 010000 STEERING				Failure Mileage	
<i>Steering Locked Couldn't Control it</i>				75000	
				Failure Speed	
				25	
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: DOTM1A9ABC036)		☐ Original Equipment ☐ Prior Repair		Failure Location:	
				<i>They took car away & was totaled</i> <i>New Highway Cavalry Rd.</i>	
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	
☒ Yes ☐ No		☐ Yes ☒ No		0	
				Number of Deaths	
				0	
				Reported to Police	
				Y	
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 2006 CHEVROLET MALIBU. WHILE DRIVING APPROXIMATELY 25 MPH, THE STEERING WHEEL SEIZED, CAUSING THE CONTACT TO CRASH THE VEHICLE INTO AN EMBANKMENT. A POLICE REPORT WAS FILED AND NO INJURIES WERE REPORTED. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 14V153000 (STEERING); HOWEVER, THE PART WAS UNAVAILABLE TO PERFORM THE RECALL REPAIR. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 75,000.					
<i>I called mfg & Recall both same day</i>					
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.					

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

*No Injuries I was traveling on Colway Rd and steering
locked and had no control. The car hit an embankment*

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

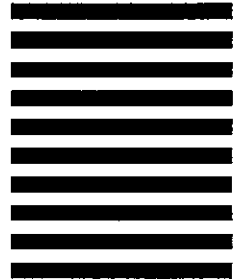
**National Highway
Traffic Safety
Administration**

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

Official Business
Penalty for Private Use \$300



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NECESSARY
IF MAILED
IN THE
UNITED STATES**



BUSINESS REPLY MAIL

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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 a report.**

or visit:

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