


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) USE ONLY 100148</p> <p>Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline</p>		<p>Date Received 30-OCT-2015 APR 29 2016</p>		<p>Repository <input type="checkbox"/></p> <p>Reference No. 10787248</p>			
<p>OWNER INFORMATION (Type or Print)</p>									
Name		Address		City		State		Zip Code	
[REDACTED]		[REDACTED]		KINGSBURG		CA		[REDACTED]	
Daytime Telephone Number		Evening Telephone Number		E-mail Address					
[REDACTED]		[REDACTED]		[REDACTED]					
<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>									
<p>VEHICLE INFORMATION</p>									
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2CNDL23F556 [REDACTED]				Make CHEVROLET		Model EQUINOX	Model Year 2005		
Date Purchased 03/2012		Dealer's Name and Telephone Number Mendocino Auto Sales			Engine: No. Cylinders 6		Fuel Type: Gas		
Original Owner <input type="checkbox"/>		Dealer's City Parlier		State CA	Zip Code 93648				
Transmission Type Automatic		<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		Powertrain		Multiple Failure:	Incident Date(s) 03-APR-2015		
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>									
Vehicle Component Code: 110000 ELECTRICAL SYSTEM					Failure Mileage 98000		Failure Speed		
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>									
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:					
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>									
Make:		Date Manufactured:		Model No./Name:					
Seat Type:		Installation System:							
Child Seat Component Code:		Failed Part:							
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>									
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured		Number of Deaths	Reported to Police N		
<p>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).</p>									
<p>TL* THE CONTACT OWNS A 2005 CHEVROLET EQUINOX. THE CONTACT STATED THAT WHILE DRIVING AT VARIOUS SPEEDS, THE INSTRUMENT PANEL WOULD INDICATE LOW FUEL ECONOMY AND THE VEHICLE WOULD BEGIN TO SLOW DOWN. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE IT WAS DIAGNOSED THAT THE ELECTRONIC CONTROL MODULE (ECM) HAD FAILED AND NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 98,000.</p>									
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.</p>				<p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>					
<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)

When I purchased this vehicle it worked fine. Since then I have had the vehicles' check engine light on turned out to be a code for the EGR valve, so I replaced it. The code is still on there and I was told it has to do with the ECM/PCM. The vehicle turns on & drives well until I am at a stop or I'm driving under 25 miles then it turns off.

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



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, [REDACTED]
1200 New Jersey Avenue SE. NEF-010
Washington, D.C. 20077-9382 W48-226



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
1-800-327-4236



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

