

 <p>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</p>		FOR AGENCY USE ONLY 100148 Date Received APR 01 2016 09-FEB-2016 Repository <input type="checkbox"/> Reference No. 10825109	
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	
Address		E-mail Address	
City	State	Zip Code	
BRIGHTON	MI		
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
3GNGK26U7YG		CHEVROLET	SUBURBAN
Model Year		Engine:	Fuel Type:
2000		No: Cylinders	GAS
Date Purchased	Dealer's Name and Telephone Number		State
3/2000 Approx	HAMILTON CHEVROLET 586 838 1532		MI
Original Owner	Dealer's City	Zip Code	
<input checked="" type="checkbox"/>	WARREN MI	48092	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
	<input type="checkbox"/> Cruise Control		ONGOING
			Incident Date(s)
			26-JAN-2016
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: BRAKES (PWS)		Failure Mileage	Failure Speed
ABS		106000	4
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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:
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 <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
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 2000 CHEVROLET SUBURBAN. WHILE DRIVING APPROXIMATELY 4 MPH ON DRY ROAD SURFACES, THE ABS ENGAGED WHEN THE BRAKE PEDAL WAS DEPRESSED. THE FAILURE RECURRED WHENEVER COMING TO A STOP. IN 2005, THE VEHICLE WAS SERVICED UNDER NHTSA CAMPAIGN NUMBER: 05V379000 (SERVICE BRAKES, HYDRAULIC); HOWEVER, THE CONTACT HAD NOT EXPERIENCED A FAILURE AT THE TIME. THE REMEDY WAS INSUFFICIENT AND THE FAILURE RECURRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 106,000.			
This is a dangerous condition that is also recorded by other owners of similar vehicles on the internet. Under no circumstances should brakes anti-lock brakes failures result in loss of braking. After over 40 years of working/driving			
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.			
MANY vehicles, I have never seen a failure mode such as this (very dangerous), I called GM CORPORATE & they don't care.			

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

Without notice brake failure from ABS at low ~~speed~~
to near stopped speeds, ABS unit cycles on dry
pavement resulting in total loss of braking.
This problem appears to be a defective design.
Feel free to call me at any time for
clarification or further detail on problem

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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POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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

