

OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

Form Approved 4-M-10 No. 3122-0003

 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 - 1981-48 Date Received: 15 NOV 2009 Repository: ☐ Reference No: 1373968	
OWNER INFORMATION (Type or Print)					
Name: [REDACTED]			Signature: [REDACTED]		E-mail Address: [REDACTED]
Address: [REDACTED]			State: [REDACTED]		City: [REDACTED]
City: WELDWOOD			State: MO		ZIP Code: [REDACTED]
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 62977 (Dec. 3, 1984).					
VEHICLE INFORMATION					
17-Digit Vehicle Identification Number (located at bottom of front of dash on driver's side): 1G4NF4339J [REDACTED]			Make: GMC		Model Year: 2006
Date Purchased: 9/28/07			Dealer's Name and Telephone Number: 636-391-7200		Engine: No. Cylinders: 8
Original Owner: [REDACTED]			State: MO		ZIP Code: 63011
Transmission Type: Auto			Powertrain: 5.3L V-8		Incident Date(s): 27-MAY-2010
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component(s) Code(s): 140000 AIR BAG(S)			Failure Message:		Failure Type(s):
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make:			Tire Model (Name or Number):		Tire Size (Example P215/55R15):
DOT No. (Example DDGAL 3ABC29):			Original Installation: ☐ Prior Failure: ☐		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:			Child Part:		
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), condition, injury(s).)					
Event: ☐ Yes ☒ No		Tire: ☐ Yes ☒ No		Number of Persons Injured:	
Narrative Description of Incident(s), Condition, Injury(s):		Number of Deaths:		Reported to Police:	
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure (e.g. parts replaced or repaired and if and part is available).					
TL: TAKATA RECALL THE CONTACT OWNS A 2006 GMC YUKON. THE CONTACT RECEIVED A RECALL NOTIFICATION OF NHTSA CAMPAIGN NUMBER 10V38000 (AIR BAGS) HOWEVER, THE PART TO DO THE REPAIR WAS NOT AVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE CONTACT STATED THAT HE HAD CALLED OR HAD DROP BY SEVERAL TIMES TO BOMBARDIER BUICK GMC WEST COUNTY DEALER, 15735 MANCHESTER RD, ELLISVILLE, MO 63011, AND WAS INFORMED THAT THERE WAS NO READY YET FOR THE REPAIR. THE MANUFACTURER WAS NOT MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. VIN TOOL CONFIRMED PART NOT AVAILABLE. AW					
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 Administration. 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 action against a manufacturer, your response, or a statement submitted by the manufacturer, may be used in support of the agency's action.					