

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

re

National Highway
Traffic Safety
Administration

1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

28-OCT-2021

Repository ☐

Reference No.
11438497

OWNER INFORMATION (Type or Print)

Name

Address

City

Cottage Grove

State

MN

ZIP Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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
3GNAXKEV7LL

MAKE
CHEVROLET

Model
EQUINOX

Model Year
2020

Date Purchased

Dealer's Name and Telephone Number
Valley Chevrolet of Hastings 6514374161

Engine:
No. Cylinders

Fuel Type:

Original Owner

Dealer's City Hastings

STATE
MN

ZIP Code
55033

4

GAS

Transmission Type

☒ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)
07-OCT-2021

☒ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 010000 STEERING, 030000 BRAKES (PWS)

Failure Mileage
2418.0

Failure Speed

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: DOTM1 9AB0336)

☐ Original Requirement
☐ 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), injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), 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).

The contact owns a 2020 Chevrolet Equinox. The contact stated while his wife was driving at an unknown speed, the power steering assist and brake assist warning lights were illuminated. The contact took the vehicle to a local dealer, where it was diagnosed with needing the brake module to be replaced. The brake module was replaced, and the brake fluid was flushed. The vehicle was repaired but experienced failure the following day. The contact took the vehicle back to the local dealer, where it was diagnosed with needing the shoulder nut on the brake module to be replaced. The vehicle was repaired but experienced failure while leaving the dealer. The manufacturer had been informed of the failure. The failure mileage was 2,418.

Turn out to be a back battery
was given out the codes
Good news

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.