

#43-R350-925



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

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**FOR AGENCY USE ONLY**

Date Received: **RECEIVED**  
**00 FEB - 8 AM 11: 49**

Office: **OFFICE OF DEFECTS INVESTIGATION**

Reference No.: **550809**

Daytime Telephone Number: [Redacted]

**OWNER INFORMATION (Type or Print)**

[Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: **1/21/00**

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN): **1GTHK33J0WF042211** (Located at bottom of windshield on driver's side)

Make: **GMC** Model: **K3500** Year: **1995**

Purchased Date: **Apr/1996** Dealer's Name: **Thornhill GMC / 1800 W. HWY 287 By pass** Engine Size: **9.5** (CID/CC/L)  Turbo  Diesel  Gas  Fuel Injection

New  Used Dealer's City: **Waxahatchie** State: **TX** Zip Code: **unknown** No. Cylinders: **2**

Manufacture Date (on driver's door or pillar): **Unknown** Transmission Type:  Manual  Automatic Restraint System:  Driverside Air Bag  Motorbelt  Passengerside Air Bag  2-Point Belt  5-Point Belt Cruise Control:  Yes  No Drivetrain:  Front  Rear  4-Wheel Vehicle Type:  Car  Sport Utility  Van  Truck  Minivan  Motorcycle  Other Body Style:  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Part Name(s): **Main Battery cable / main battery box** Location:  Left  Right  Front  Rear Failed Part(s):  Original  Replacement Handicap Adaptive Equip:  Yes  No

**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand: \_\_\_\_\_ Tire Name: \_\_\_\_\_ Complete Tire Size: \_\_\_\_\_

No. of Failures: \_\_\_\_\_ Date(s) of Failure(s): \_\_\_\_\_ Mileage at Failure(s): \_\_\_\_\_ Vehicle Speed at Failure(s): \_\_\_\_\_ Failed Part(s) Available?  Yes  No NHTSA Previously Contacted?  Yes  No

**APPLICABLE INCIDENT INFORMATION**  
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured: <b>0</b>	Number of Fatalities: <b>0</b>	Reported to Manufacturer: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of incident(s), failure(s), crash(es), and injury(ies):

**Vehicle caught fire when idling. Fire started under hood in engine compartment on driver side of vehicle. It appeared that the main battery distribution box was on fire. Also a small fire was present prior to the vehicle fire. Vehicle was destroyed due to this defect/failure.**

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.