



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: FEB 10 AM 6:12

OFFICE OF TRAFFIC SAFETY INVESTIGATION

Reference No. **550873**

OWNER INFORMATION (Type or Print)

Name: [Redacted]
 Address: [Redacted]
 City: [Redacted]
 State: [Redacted]
 Zip: [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): 1G1LT53T3MY2287611
 Make: Chevrolet Model: Corsica Year: 1991

Purchased Date: 1995 Dealer's Name: Classic Dealer's City: [Redacted] State: IL Zip Code: 60085

Engine Size (CID/CCU): 3.1 No. Cylinders: 4 Turbo: Diesel: Gas: Fuel Injection:

Transmission Type: Manual Automatic
 Restraint System: Driver's Side Air Bag Motor Bell Passenger Side Air Bag 2-Point Belt 3-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): Steering Column
 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): N/A 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: Yes No
 Fire: Yes No
 Number of Persons Injured: 0
 Number of Fatalities: 0
 Reported to Manufacturer: Yes No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies):
 ON parking in lot smelled smoke and observed some light black or gray. Looked up under column pad saw orange flicker of flame. Immediately called 911 (Hurst, IL) and Hurst Fire Dept responded.

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 administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7882