

U.S. Department
of TransportationNational 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

FOR AGENCY USE ONLY

Date Received

COPIED RECEIVED
POSTED

Od. or

r_dt

ed_rt

up_itr

Reference No.

OFFICE
DEFECTS INVS

555229

Daytime Telephone Number

OWNER INFORMATION (Type or Print)

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

Date

9, 11, 00

PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) 1G1JF5240X7274258		Make CHEV.	Model CAVALIER	Year 1999
Purchased Date 5-28-99	Dealer's Name JEFF WYLER CHEVROLET, INC.		Engine Size (CID/CYL) L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City BATAVIA	State OH.	Zip Code 45103	No. Cylinders 4
Manufacture Date (on driver's door or pillar) 4/99	Transmission Type <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Drivers Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passenger Air Bag <input checked="" type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other		Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other		

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) Brake Pads and Rotors	Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)	NHTSA Previously Contacted?
		<input type="checkbox"/> Yes <input type="checkbox"/> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured NA	Number of Fatalities NA	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). **THE BRAKES HAVE BEEN FIXED SEVEN TIMES AND THE PROBLEM KEEPS COMING BACK. NO ACCIDENT HAS OCCURRED YET, BUT WE ARE AFRAID TO DRIVE CAR - AFRAID OF BRAKE FAILURE.**

ALSO - DESIGN AND CONSTRUCTION OF WINDSHIELD CAUSES BLIND PERIODS IN CERTAIN SITUATIONS - GLARE MAKES IT IMPOSSIBLE TO SEE UNDER CERTAIN CONDITIONS. MY WIFE ALMOST WENT OVER THE SIDE OF A MOUNTAIN BECAUSE OF THE PROBLEM.

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.

Mail postage free or fax to 202-366-7882

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

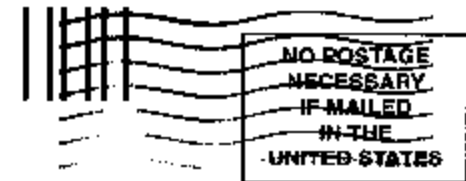
WE TRIED TO GET THIS SITUATION STRAIGHTENED OUT WITH GM - HERE IN OHIO IT'S THROUGH THE BBB - THEY HAD A NON-MECHANIC ARBITRATOR THAT SAID THERE WAS NOTHING WRONG WITH THE CAR. HOWEVER, A GM MECHANIC TOLD US THE NEXT DAY THE BRAKES WERE TORN UP AGAIN. THEY HAVE TO BE FIXED MORE OFTEN THAN I CHANGE MY OIL. THE ROTORS HAVE BEEN TURNED - MORE THAN ONCE - REPLACED - PADS HAVE BEEN REPLACED - YET THE BRAKES STILL SOUND LIKE SAND PAPER WHEN APPLIED - ONE MECHANIC SAID THE ROTORS ARE TOO SMALL FOR THE CAR, AND THE METAL NEEDS TO BE A HIGHER GRADE. THE MALION IS EVEN WORSE THAN THE CAVALIER. I'VE TALKED TO MANY OTHER CAVALIER OWNERS AT THE GARAGES WITH THE SAME PROBLEM. HOPEFULLY WE WON'T HAVE TO WAIT UNTIL PEOPLE ARE KILLED BEFORE SOMETHING IS DONE. I AM SENDING THIS INFORMATION TO MY SENATOR - TOM SAWYER; TO SUE BAILEY-ON MATSA - ATTACH ADDITIONAL SHEETS IF NECESSARY + BILLY TAUBER LDBATOR FROM LOUISIANA - CHAIRMAN OF THE TIRE RECALL NOW IN FORCE.

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St. S.W. Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590



Complete and return or place in your car manual for future use



**VEHICLE
OWNER'S
QUESTIONNAIRE
(VOQ)**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

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