



DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
 TO REPORT VEHICLE SAFETY DEFECTS
 1-888-DASH-2-007
 (1-888-327-4236)
 INTERNET: www.nhtsa.dot.gov/hotline

U.S. Department of Transportation
 National Highway Traffic Safety Administration

Date Received

00 OCT -4 PM 1:20

Officer

Reference No.

OFFICE DEFECTS INVESTIG

555365

Dealer Telephone Number

OWNER INFORMATION (Type or Print)

Name: [Redacted]
 State: [Redacted]
 City: [Redacted]

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

Signature of Owner

Date 09.22.00

PRODUCT INFORMATION

Vehicle Identification No. (VIN) (17 Digits) 1G B D M 1 9 Z 7 M B 1 9 4 1 0 3		Make CHEVY	Model ASTRO VAN	Year 1991		
Purchased Date 11/91	Dealer's Name TIPOTEX CHEVROLET	Engine Size (CID/CCA)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection			
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City BROWNSVILLE	State TX	Zip Code	No. Cylinders		
Manufacture Date (on driver's door or pillar) 5/91	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input type="checkbox"/> Overide Air Bag <input type="checkbox"/> Passenger Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-wheel	Vehicle Type <input type="checkbox"/> Car <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other VAN

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input checked="" 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 FIRESTONE	Tire Name RADIAL ATX	Complete Tire Size P215/75R15
No. of Failures	Date(s) of Failure(s) 9/11/00	Mileage at Failure(s) 75,312
Vehicle Speed at Failure(s) 65 mph	Failed Part(s) available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" 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	Number of Fatalities	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).

FIRESTONE TIRE TREAD SEPERATION JUST LIKE THE OTHERS ON TV

NOT ON RECALL LIST!

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 449 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.

Use the attached Vehicle Owner's Questionnaire (VOQ) to report a motor vehicle safety problem to the National Highway Traffic Safety Administration (NHTSA) of the U.S. Department of Transportation (DOT). You may also call the DOT Auto Safety Hotline at 1-888-DASH-2-DOT (1-888-327-4236) or file your report online at our Web site at www.nhtsa.dot.gov/hotline.

If a safety-related defect exists in a motor vehicle, or item of motor vehicle equipment such as a child safety seat, the manufacturer may be required to recall it and fix it at no cost to the owner. Your report is the first step in this process. It will be viewed with other reports to identify safety defect trends that require investigation.

Government investigators will analyze the problem. If warranted, the manufacturer will be asked to conduct a safety recall campaign.



1-888-DASH-2-DOT

