



US 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: <http://www.nhtsa.dot.gov>

**FOR AGENCY USE ONLY**

Date Received: 02/16/01  
Reference No. 560243  
560243

**OWNER INFORMATION (Type or Print)**

[Redacted Owner Information]

Dealer Telephone Number: [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: 02/25/01

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN) (17 Digits) <u>1GN0T13W6T2205885</u>	(Located at bottom of windshield on driver's side)	Vehicle Make <u>CHEV</u>	Vehicle Model <u>BLAZER</u>	Vehicle Year <u>1996</u>	Current Odometer Reading <u>99151</u>
Purchased Date <u>2/16/96</u>	Dealer's Name <u>LWJACKS</u>	Engine Size (CID/CC/L) <u>4.3</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas	No. Cylinders <u>6</u>	<input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City <u>DAVENPORT</u>	State <u>IA</u>	Zip Code <u>52806</u>	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	
Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Airbag <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 checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <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**

Component <u>Suspension</u>	Part Name(s) <u>RF Ball Joint Failure - caused many other parts</u>	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) <u>March 20, 2000</u>	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) <u>81,311</u>		
	Vehicle Speed at Failure(s): <u>40-50 MPH</u>		

**APPLICABLE INCIDENT INFORMATION**

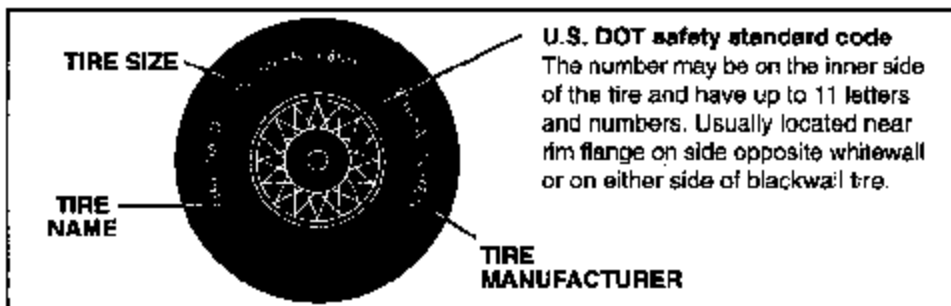
(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number Persons Injured <u>0</u>	Number of Fatalities <u>0</u>	Estimated Property Damage <u>\$ 1025</u>	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)**

To report defective or failed tires provide the following: DOT Number, Tire Manufacturer, Tire Name, Tire Size (include all numbers and letters).  
Note: This information not required for normal operation tires.

DOT	Manufacturer	Tire Name	Complete Tire Size
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**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 maybe used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the 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.

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

Right Front Suspension collapsed. Slowed before  
tire and wheel exploded --- coasted off of  
highway.

Major repairs/inspection revealed that left  
front Ball joints also loose/needed repair.

THIS Vehicle (1996 Blazer) has had major  
problems: Coolant, entire cooling system, oil cooler,  
transmission failure (faulty), rear axle bearings,  
etc, etc, etc.

I won't buy another Blazer <sup>and lucky my wife not killed!</sup>

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES.

**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  
DOT Auto Safety Hotline, NSA-10.1  
400 7th Street, SW  
Washington, DC 20590



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OR

**DASH2DOT**

and dial toll free at

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