Form Approved: O.M.B. No. 2127-0039

DOT Auto Safety Hotline

U.S. Department of Transportation

National Highway Traffic Safety Administration

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received: 02-FEB-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No. 718202

[redacted]

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

Signature of Owner _____ Date____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G1BN52P4RR166931	CHEVROLET	IMPALA	1994	

Purchase Date: 01-NOV-1996 ☐ New ☒ Used

Dealer's Name _____

City _____ State _____ Zip Code _____

Engine Size (CID/CC/L 350 ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection

No Cylinders _____

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☒ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
06136000	FUEL:FUEL PUMP	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	28-JAN-2000 / 103000 / 60	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

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

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☐ Yes ☒ No				☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

MY HUSBAND DISASSEMBLED THE GAS TANK TO GET TO THE FUEL PUMP SO HE COULD REPLACE IT. THE FUEL PUMP IS LOCATED INSIDE THE TANK AND WHEN HE LOOKED AND THE WIRING HARNESS THE WIRES HAD MELTED THE EXTERIOR COATING AND THE PLASTIC FITTING THAT ALSO SIT IN THE GAS TANK. WE FEEL THAT THIS COULD HAVE ENDED VERY TRAGIC WITH THE GAS TANK CATCHING ON FIRE. I AM 5 MONTHS PREGNANT AND WOULD LIKE TO KNOW IF THIS PROBLEM HAS OCCURRED IN THE PAST AND IF THERE IS SOME SORT OF ACTION WE CAN TAKE TO KEEP IT FROM HAPPENING AGAIN. *AK

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