

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration
**DOT Auto Safety Hotline
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

15-AUG-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

727965

 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) <small>(Listed at front of windshield or drivers side)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| 1G1NE52J2XY121630 | CHEVROLET | MALIBU | 1999 | |

| | | | |
|---|---------------------------------------|-------------------------------------|--|
| Purchase Date 01-JUL-1999 | Dealer's Name _____ | Engine Size (CID/CC/L) 6 CYL | <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 | City _____ State _____ Zip Code _____ | No. Cylinders _____ | |

| | | | | | | |
|--|---|--|--|---|---|--|
| Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic | Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-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 type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult Truck <input type="checkbox"/> Motorcycle | 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 02700000 | Par. Name(s) TIRES | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear | Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
|------------------------------|------------------------------|---|---|

| | | | |
|-----------------------------|--|---|---|
| No. of Failures 2 | Date(s) of Failure(s) 14-AUG-2000 | Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Mileage at Failure(s) 11800 | | |
| | Vehicle Speed at Failure(s) 2 | | |

APPLICATION 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 type="checkbox"/> No | Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured 0 | Number of Fatalities 0 | Estimated Property Damage | Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|---|---------------------------------------|----------------------------------|---------------------------|---|

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

THE TIRES HAVE FAILED TO HOLD AIR PROPERLY FOR ANY LENGTH OF TIME SINCE ORIGINALLY PURCHASING THE VEHICLE. IT WAS RECENTLY NOTICED THAT THE TIRES HAVE GONE COMPLETELY BALD IN THE CENTER OF THE TIRE. IN CONTACTING THE SERVICE MANAGER AT DAVE HEINRICH CHEVROLET IN LOCKPORT, NY, WE ARE TOLD THAT THIS IS A COMMON PROBLEM WITH THE MALIBUS IN THAT GM STATES THAT THESE TIRES WERE NOT DESIGNED FOR THIS CAR. GM HAS SINCE ISSUED A BULLETIN STATING THAT THESE TIRES SHOULD ONLY BE INFLATED TO 28# IN FRONT AND 26# IN BACK, WHICH VARIES FROM THE MANUFACTURER SUGGESTION. GM REFUSES TO ADDRESS THIS ISSUE AND THE TIRES APPEAR TO BE UNSAFE, ALTHOUGH THE SERVICE MANAGER STATES THAT THEY "ARE PROBABLY SAFE". GM SAYS THAT OUR ONLY REMEDY WOULD BE TO CONTACT AN AUTHORITY.

CONTINUED ON BACK PLEASE

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 may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the 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.