

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire (VOQ)**  
 U.S. Department of Transportation  
**National Highway Traffic Safety Administration**  
 NATIONWIDE 1-888-DASH-2-DOT  
 1-888-327-4236  
 www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258	
Data Received	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
15-AUG-2000	
Reference No. <b>728036</b>	

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
1GCEC14ZXNE171005	CHEVROLET TRU	C1500	1992	

Purchase Date <b>01-JUL-1992</b>	Dealer's Name _____	Engine Size (CID/CC/L) 4.3L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input checked="" 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 type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____
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**FAILED COMPONENT(S)/PART(S) INFORMATION**

Component <b>02100000</b>	Par. Name(s) <b>SUSPENSION:INDEPENDENT FRONT</b>	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No of Failures <b>1</b>	Date(s) of Failure(s) <b>15-AUG-2000</b> Mileage at Failure(s) <b>170300</b> Vehicle Speed at Failure(s) <b>60</b>	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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**APPLICATION INCIDENT INFORMATION**

*(Please describe in detail the incident(s), Failure(s), Crashes, 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	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

**WHILE DRIVING @60MPH THE UPPER A ARM PIVOT BOLT ON THE PASSENGER SIDE BROKE WHILE SLOWING DOWN THIS CAUSED A SUDDEN PULL TO THE RIGHT FOLLOWED BY A UNCONTROLLABLE HARD PULL TO THE LEFT WHICH PUT MY TRUCK IN THE CENTER OF THE DIVIDED HIWAY.....IT WAS IMPOSSIBLE TO MOVE THE TRUCK AT MORE THAN 15 MPH AND STILL HAVE CONTROL. AS THIS PART CANNOT BE INSPECTED WITHOUT REMOVAL OF CRITICAL ALIGNMENT CAMS AND COMPRESSION OF THE COIL SPRINGS IT IS NOT SOMETHING ANY SUSPENSION WILL NOTICE. I HAVE DROVE THIS TRUCK FOR OVER 170,000 MILES AND IT HAS RETURNED TO THE DEALER FOR SERVICE AS OF THIS MORNING THERE WERE NO WARNING SIGNS AS IT DROVE STRAIGHT WITH NO PULL TO EITHER SIDE AND NO WANDERING. AS IT HAD NO PROBLEMS OR WARNINGS I FIND THIS VERY ALARMING AND AM THANKFUL**

CONTINUED ON BACK (IF NEEDED)

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.