



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

**Auto Safety Hotline**

## Vehicle Owner's Questionnaire

**NATIONWIDE 1-800-424-9393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>**

**FOR AGENCY USE ONLY 936**

Date Received

18-DEC-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

8000843

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1GNDT13W5T2279248	CHEVROLET TRUCK	BLAZER	1996			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <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 _____

### FAILED COMPONENT(S)/PART(S) INFORMATION

Component 15600000	Part Name(s) EQUIPMENT:ELECTRIC EQUIPMENT:RADIO:TAPE DECK ETC.	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
No of Failure	Dates of Failure(s) 18-OCT-2001 Mileage at Failure(s) 60000 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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### NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

**AN ELECTRICAL SHORT CIRCUIT OCCURS WITHIN RADIO WHICH CAUSES RADIO TO MALFUNCTION.  
PLEASE GIVE ANY FURTHER DETAILS. \*AK**

CONTINUE ON REVERSE

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.

 <p><b>DOT Auto Safety Hotline</b>  <b>Vehicle Owner's Questionnaire (VOQ)</b>          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</p>		<p><b>FOR AGENCY USE ONLY</b> 335</p> <p>Date Received: <b>18-DEC-2001</b></p> <p>DEFECT OFFICE INVESTIGATION</p> <p>Qd_or _____          rt_dt _____          od_rt _____          up_tr _____</p> <p>Reference No. <b>8000843</b></p> <p>Work Num: _____          Home Num: _____</p>	
<p><b>OWNER INFORMATION (Type or Print)</b></p> <p>[Redacted] <b>730635</b></p>			
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?          In the at _____ and address to the vehicle manufacturer. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>Signature: _____ Date: <b>1/10/02</b></p>			
<p>Vehicle Identification Number (located on driver's side)  <b>1GNDT13W5T2279248</b></p>		<p>Vehicle Make  <b>CHEVROLET TRU BLAZER</b></p>	
<p>Purchase Date  <b>July 1996</b></p> <p><input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>		<p>Dealer's Name: <b>LACON Chevrolet</b>          City: <b>Snyder</b> State: <b>W.V.</b> Zip Code: <b>25482</b></p>	
<p>Transmission Type  <input type="checkbox"/> Manua <input checked="" type="checkbox"/> Automatic</p>		<p>Current Odometer Reading  <b>64,600</b></p>	
<p>Antilock Brakes  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Engine Size (CID/CC/L)          No Cylinders: <b>6</b></p>	
<p>Restraint System  <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt  <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel  <input type="checkbox"/> Passengerside Airbag</p>		<p>Vehicle Year  <b>1996</b></p>	
<p>Crash Control  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Vehicle Type  <input type="checkbox"/> Car <input type="checkbox"/> Sport Ut  <input type="checkbox"/> Van <input type="checkbox"/> Truck  <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle  <input type="checkbox"/> Other</p>	
<p>Body Style  <input type="checkbox"/> 2-Door  <input checked="" type="checkbox"/> 4-Door  <input type="checkbox"/> Stationwagon  <input type="checkbox"/> Pick Up  <input checked="" type="checkbox"/> Truck</p>		<p>Failed Component (S)/PART(S) INFORMATION</p>	
<p>Component  <b>15600000</b></p>		<p>Part Name(s)  <b>EQUIPMENT: ELECTRIC EQUIPMENT: RADIO: TAPE DECK ETC.</b></p>	
<p>No of Failures  <b>1</b></p>		<p>Date(s) of Failure(s)  <b>18-OCT-2001</b></p>	
<p>Mileage at Failure(s)  <b>60000</b></p>		<p>Vehicle Speed at Failure(s)  <b>Doesn't matter</b></p>	
<p>Failed Part(s)  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>NHTSA Previously  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p><b>APPLICATION INCIDENT INFORMATION</b>          (Please describe in detail the incident(s), failure(s), crash(es), and injury(s) on the back of this form.)</p>			
<p>Crash  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>Fire  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Number of Persons Injured  <b>0</b></p>		<p>Number of Fatalities  <b>0</b></p>	
<p>Estimated Property Damage  <b>5000</b></p>		<p>Reported to Police  <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p><b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b></p> <p>AN ELECTRICAL SHORT CIRCUIT OCCURS WITHIN RADIO WHICH CAUSES RADIO TO MALFUNCTION. PLEASE GIVE ANY FURTHER DETAILS. *AK</p> <p>I feel that this Defect should be replaced you have no control over the radio at times it</p> <p>Disk (Del co - has)</p>			
<p>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.</p>			

