



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 1220

Date Received

31-DEC-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8001268

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		
1GNDT13S422203287	CHEVROLET TRUCK	TRAILBLAZER	2002			
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 checked="" 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 checked="" 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 10200000	Part Name(s) VISUAL SYSTEMS:MIRRORS	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) _____ Mileage at Failure(s) _____ 6500 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)

POWER MIRRORS MALFUNCTIONED; MIRRORS WILL AUTOMATICALLY MOVE THEMSELVES, AND THEY SHOULD NOT DO THAT. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

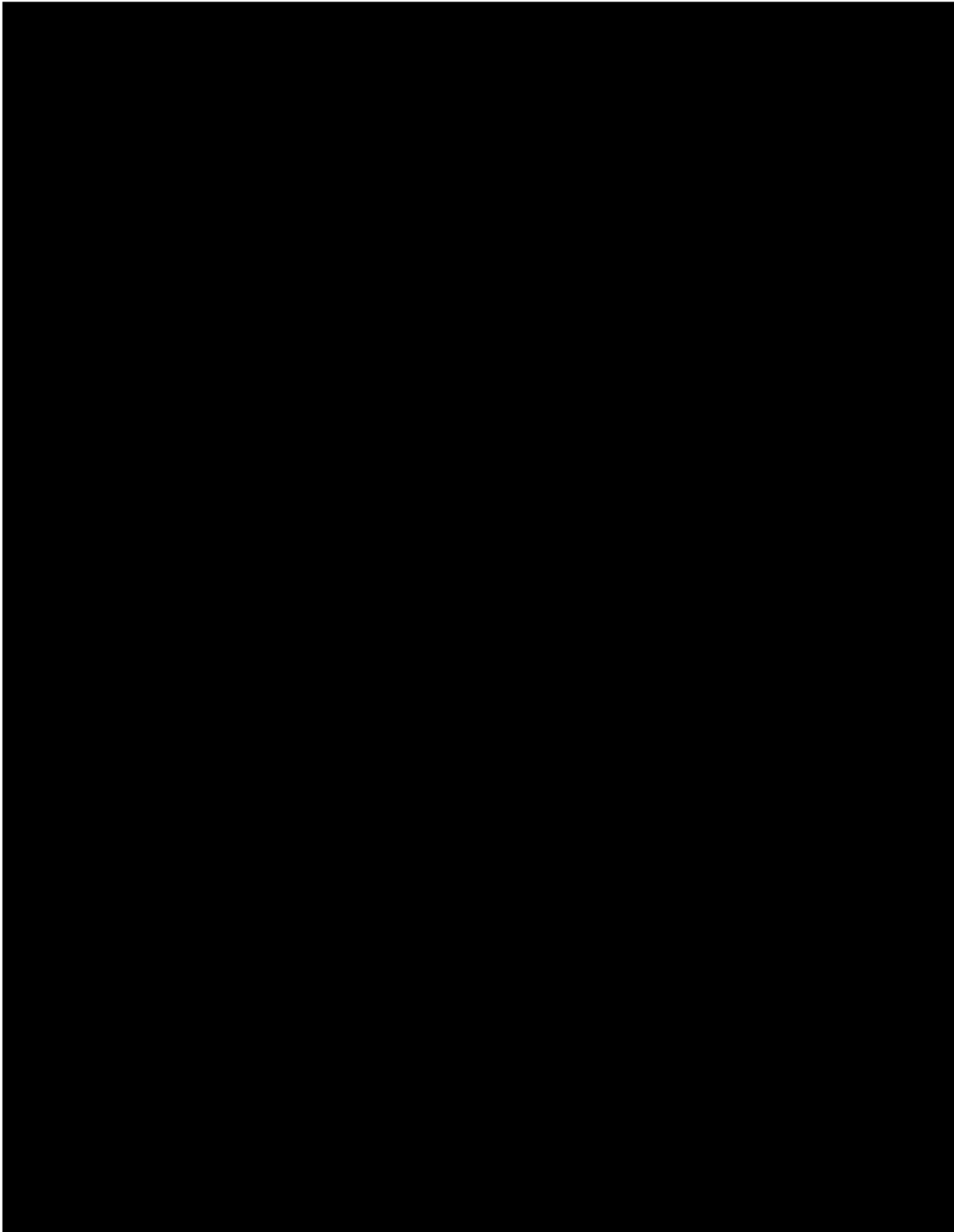
CONTINUED ON REVERSE

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.

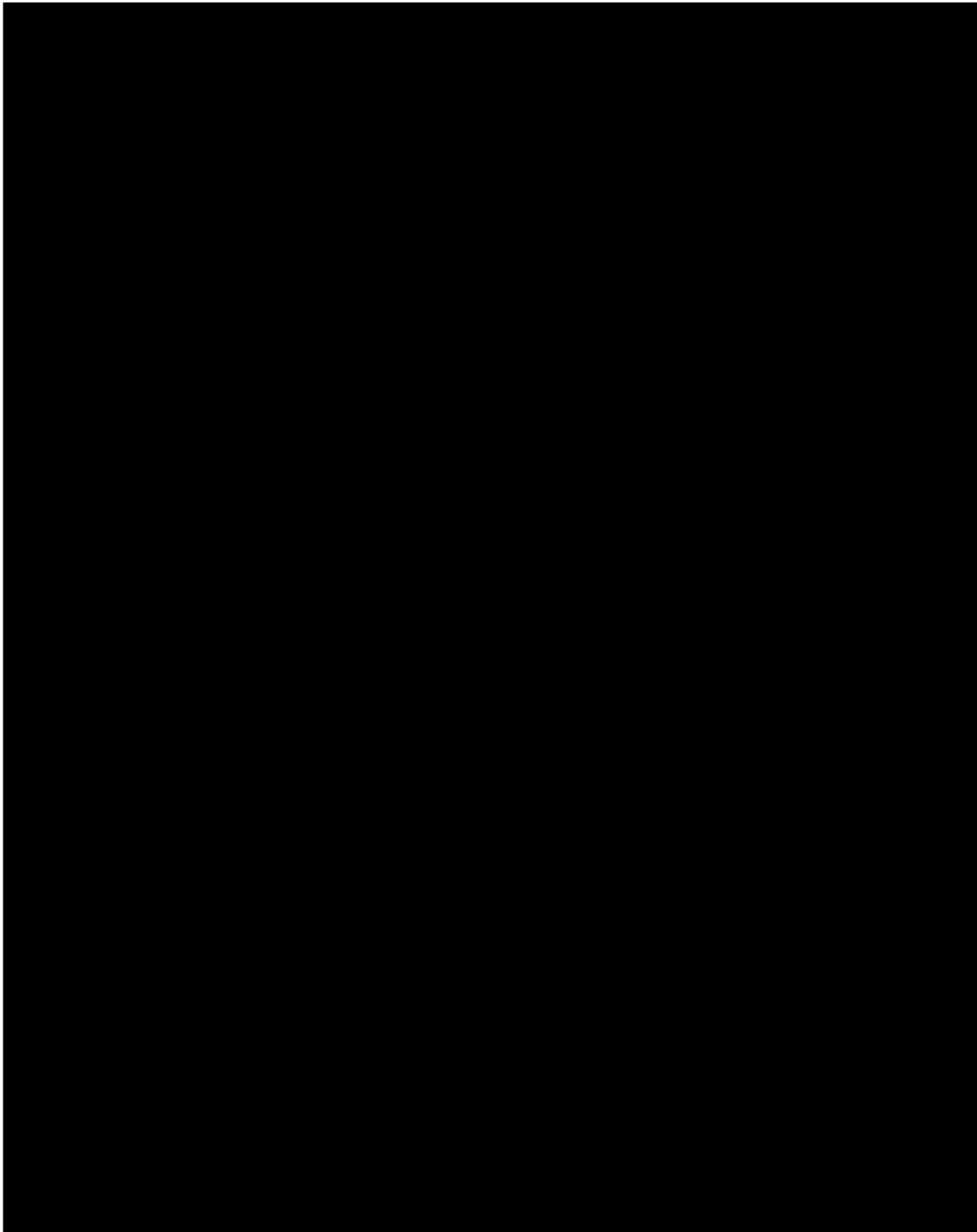
DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NAT:ONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		AGENCY USE ONLY 1220 Received FEB 23 11 09 AM '01 DEPT. OF JUSTICE RECEIVED INVESTIGATION	
U.S. Department of Transportation National Highway Traffic Safety Administration		Od_or _____ rt_dt _____ gd_rt _____ up_itr _____ Reference No. 8001268	
OWNER INFORMATION (Type or Print) [Redacted] 731548		Work Number [Redacted] Home Number [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of your signature, please provide name and address to the manufacturer.		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Date 1/11/02	
Signature of Owner [Redacted]			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1GNDT13S422203287		Vehicle Make CHEVROLET TRU	Vehicle Model TRAILBLAZER
		Vehicle Year 2002	Current Odometer Reading 7302
Purchase Date <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used		Dealer's Name _____ City _____ State _____ Zip Code _____	
		Engine Size (CID/CC) 4.2L No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
Transmission Type <input type="checkbox"/> Manua <input checked="" 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"/> Diverside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Drive Train <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 checked="" type="checkbox"/> Other
			Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4 Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input checked="" type="checkbox"/> Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 10200000	Part Name(s) VISUAL SYSTEMS:MIRRORS	Location <input type="checkbox"/> Left Front <input type="checkbox"/> Right Rear <input type="checkbox"/> Left Rear <input type="checkbox"/> Right Front	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) 6500 Vehicle Speed at Failure(s) ALL SPEEDS	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 Damage	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
POWER MIRRORS MALFUNCTIONED; MIRRORS WILL AUTOMATICALLY MOVE THEMSELVES, AND THEY SHOULD NOT DO THAT. PLEASE PROVIDE ANY FURTHER INFORMATION, IF ANY.			
CONTINUE ON BACK IF NEEDED			
The Privacy Act of 1974-Public Law 93-502: 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.			

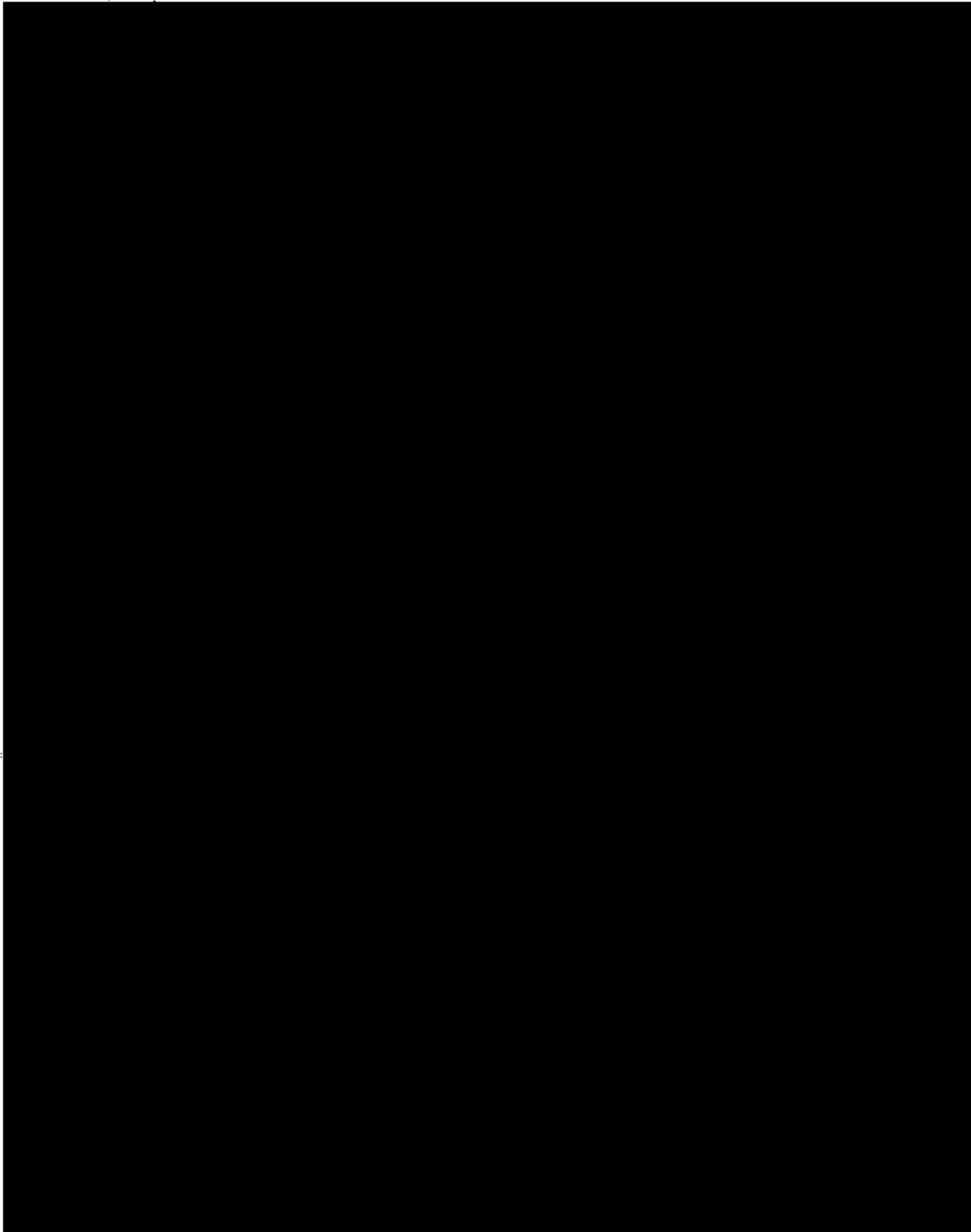
**THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6)**

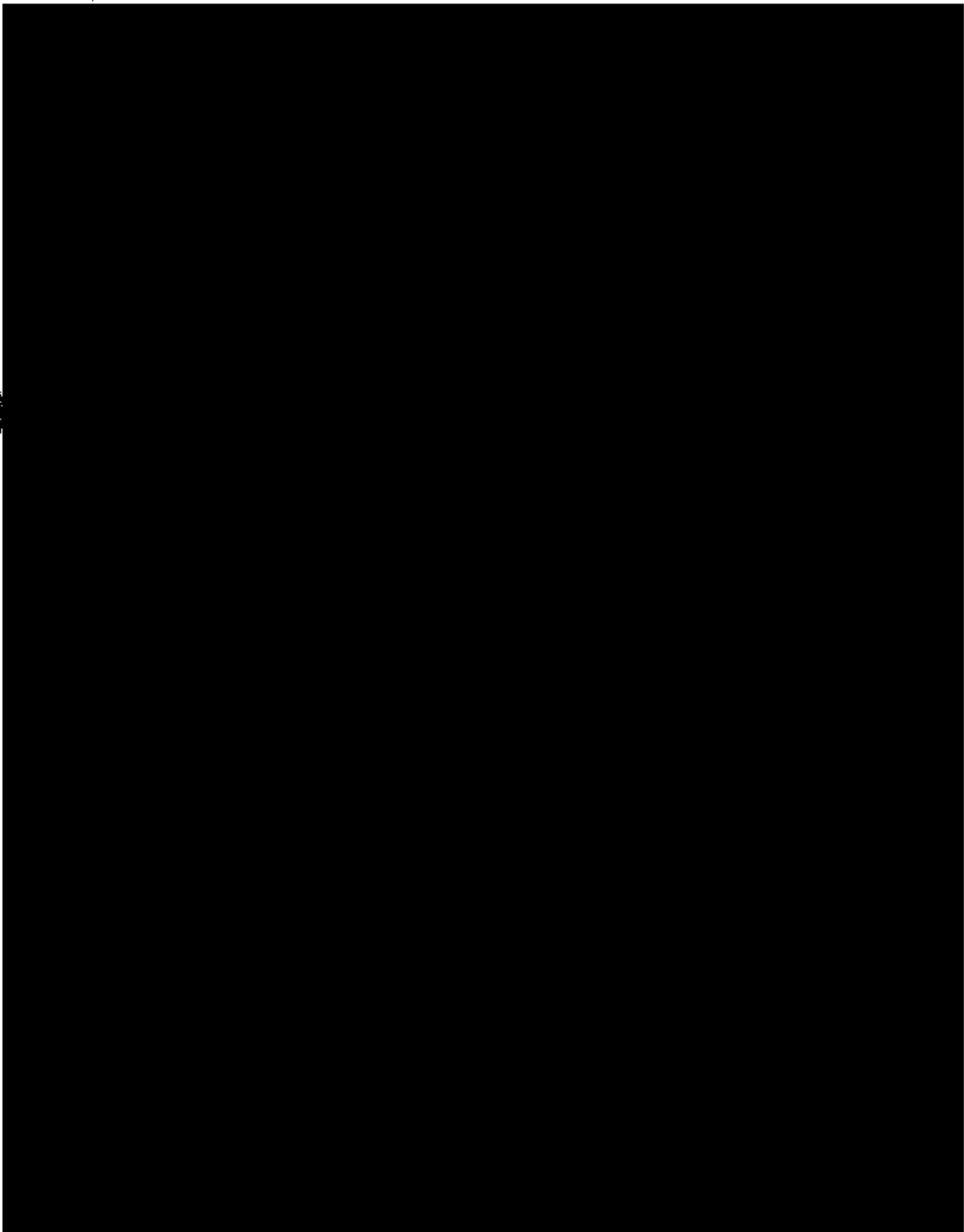
(Page 1 through Page 10)

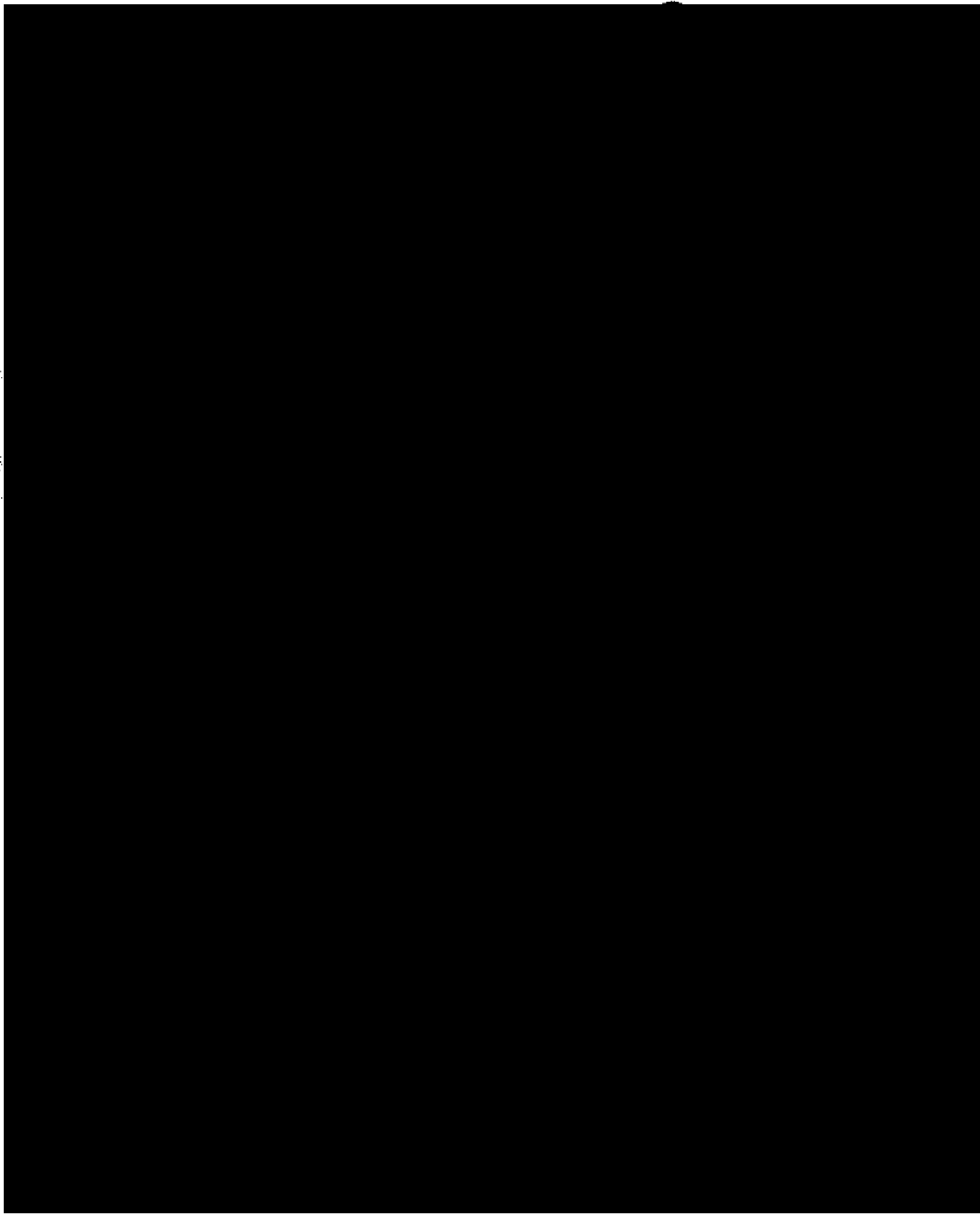












the first of these is the fact that the system is not closed. The system is open to the environment, and this means that there is a constant exchange of matter and energy between the system and its surroundings. This is a key feature of the system, and it is what makes it so interesting. The second of these is the fact that the system is not in equilibrium. The system is constantly changing, and this means that it is always in a state of flux. This is another key feature of the system, and it is what makes it so dynamic.

The third of these is the fact that the system is not linear. The system is highly non-linear, and this means that small changes in the input can lead to large changes in the output. This is a key feature of the system, and it is what makes it so complex. The fourth of these is the fact that the system is not deterministic. The system is highly stochastic, and this means that its behavior is unpredictable. This is another key feature of the system, and it is what makes it so fascinating.

The fifth of these is the fact that the system is not static. The system is constantly evolving, and this means that it is always in a state of flux. This is a key feature of the system, and it is what makes it so dynamic. The sixth of these is the fact that the system is not isolated. The system is highly interconnected, and this means that it is always in a state of flux. This is another key feature of the system, and it is what makes it so complex.

The seventh of these is the fact that the system is not homogeneous. The system is highly heterogeneous, and this means that it is always in a state of flux. This is a key feature of the system, and it is what makes it so dynamic. The eighth of these is the fact that the system is not uniform. The system is highly non-uniform, and this means that it is always in a state of flux. This is another key feature of the system, and it is what makes it so complex.

The ninth of these is the fact that the system is not symmetric. The system is highly asymmetric, and this means that it is always in a state of flux. This is a key feature of the system, and it is what makes it so dynamic. The tenth of these is the fact that the system is not balanced. The system is highly unbalanced, and this means that it is always in a state of flux. This is another key feature of the system, and it is what makes it so complex.

The eleventh of these is the fact that the system is not stable. The system is highly unstable, and this means that it is always in a state of flux. This is a key feature of the system, and it is what makes it so dynamic. The twelfth of these is the fact that the system is not predictable. The system is highly unpredictable, and this means that it is always in a state of flux. This is another key feature of the system, and it is what makes it so fascinating.

