



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 1362

Date Received

04-JAN-2002

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

8001553

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 windshield and driver's side door)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
NOT AVAILABLE	CHEVROLET TRUCK	BLAZER	1998			
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 type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05150040	Part Name(s) ENGINE:OIL FILTER/BRACKET	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) _____ 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)

WHILE DRIVING OR WHEN VEHICLE IS PARKED OIL IS LEAKING, CAUSE UNKNOWN. CONSUMER WAS CONCERNED THAT THIS COULD RESULT IN A FIRE. PLEASE GIVE ANY FURTHER DETAILS.*AK

GOVERNMENT USE ONLY

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.



Vehicle Owner's Questionnaire (VOQ)

NAT: ONWIDE 1-888-DASH-2-DOT
 1-888-327-4236
 www.nhtsa.dot.gov/hotline

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

DOT Auto Safety Hotline

Reference No. 8001553

Work Number 732118

Home Number

Signature of Owner

Date 1/23/02

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES

In the absence of an authorized signature, provide your name and address to the vehicle manufacturer.

Signature of Owner

Vehicle Identification Number (VIN)

Vehicle Make

Vehicle Model

Vehicle Year

Current Odometer Reading

Purchase Date

Dealers Name

City

State

Zip Code

Engine Size

Engine Type

Transmission Type

Antilock Brakes

Restraint System

3-Point Belt

Motorized

2-Point Belt

Passenger Side Airbag

Yes

No

Manual

Automatic

Body Style

2-Door

4-Door

Station Wagon

Pick Up

Truck

Other

Car

Van

Minivan

Motorcycle

Vehicle Type

Front

Rear

4-Wheel

Drive Type

Left

Right

Failed Parts

Original

Replacement

Location

Failed Parts

Right

Left

Failed Parts

Previously

Failed

Parts

Yes

No

Vehicle Speed at Failure(s)

Mileage at Failure(s)

Number of Failures

Crash

Yes

No

Number of Persons Injured

Number of Failures

Estimated Property Damage

Reported to Police

Yes

No

Crash

Yes

No

Vehicle Speed at Failure(s)

Mileage at Failure(s)

Number of Failures

Crash

Yes

No

Number of Persons Injured

Number of Failures

Estimated Property Damage

Reported to Police

Yes

No

Crash

Yes

No

Vehicle Speed at Failure(s)

Mileage at Failure(s)

NAI: DESCRIPTIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING OR WHEN VEHICLE IS PARKED OIL IS LEAKING, CAUSE UNKNOWN, CONSUMER WAS CONCERNED THAT THIS COULD RESULT IN A FIRE, PLEASE GIVE ANY FURTHER DETAILS. AK

CONSTANT OIL LEAK FROM BOTH SIDS OF 201 KILDES

SEE INCLOSED DIAGRAM; ITEM 1 UPPER KILDES @ 69.88

ITEM 2 LOWER KILDES @ 41.67

4.4668 195

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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.

CONTINUE ON BACK IF NEEDED



