



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 436**

Date Received

12-MAR-2002

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

Reference No.

8005466

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		
NOT AVAILABLE	CHEVROLET TRUCK	BLAZER	1997			
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 checked="" type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input checked="" 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 checked="" 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 06317000 12420000	Part Name(s) FUEL:FUEL INJECTION:UNKNOWN TYPE:INJECTOR INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR	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) 05-MAR-2002 Mileage at Failure(s) 103000 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 Polic <input type="checkbox"/> Yes <input type="checkbox"/> No
-------------------------------------------------------------------	------------------------------------------------------------------	---------------------------	----------------------	--------------------------	-------------------------------------------------------------------------------

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

ENGINE CHECK LIGHT ILLUMINATED IN THE VEHICLE. DEALER DIAGNOSED A RUPTURED FUEL INJECTION. FUEL BACKED UP TO THE COMPUTER MODULE THAT COULD HAVE CAUSED A FIRE IF IGNITED. THE DEALER STATED THE PROBLEM HAS NEVER BEEN SEEN TO THIS DEGREE.\*AK

COPIED FROM NHTSA - REF 101

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.



U.S. Department of Transportation  
National 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 436**

Date Received: 12-MAR-2002  
Office: INVESTIGATION  
Reference No.: 8005466

[Redacted Signature Area]

FREDERICK MD [Redacted]

Work [Redacted]  
Home [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  YES  NO  
In the absence of an address to the vehicle manufacturer.  
Signature of Owner [Redacted] Date: 5/18/2002

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side): 1GNDT13W2V2154751  
Vehicle Make: CHEVROLET TRUCK  
Vehicle Model: BLAZER  
Vehicle Year: 1997  
Current Odometer Reading: 103879

Purchase Date: [Redacted]  
Dealer's Name: [Redacted]  
City: [Redacted] State: [Redacted] Zip Code: [Redacted]  
Engine Size (CID/COIL): 4.3  
No. Cylinders: 6  
 Turbo Diesel  
 Fuel Injection

Transmission Type:  Automatic  
Antilock Brakes:  Yes  
Restraint System:  3-Point Belt,  Motorbelt,  Driverside Airbag,  2-Point Belt,  Passengerside Airbag  
Cruise Control:  Yes  
Drive Train:  4-Wheel  
Vehicle Type:  Sport Ult Truck  
Body Style:  2-Door,  4-Door,  Stationwagon,  Pick Up,  Truck

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

Component: 06317000, 12420000  
Part Name(s): FUEL:FUEL INJECTION:UNKNOWN TYPE:INJECTOR, INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR  
Location:  Left,  Right,  Front,  Rear  
Failed Part(s):  Original,  Replacement

No. of Failures: [Redacted]  
Date(s) of Failure(s): 05-MAR-2002  
Mileage at Failure(s): 103000  
Vehicle Speed at Failure(s): [Redacted]  
Failed Part(s):  Yes,  No  
NHTSA Previously:  Yes,  No

**APPLICATION INCIDENT INFORMATION**

(Please describe in detail the incident(s), Failure(s), Crash(es))

**ENGINE CHECK LIGHT ILLUMINATED IN THE VEHICLE. DEALER DIAGNOSED A RUPTURED FUEL INJECTION. FUEL BACKED UP TO THE COMPUTER MODULE THAT COULD HAVE CAUSED A FIRE IF IGNITED. THE DEALER STATED THE PROBLEM HAS NEVER BEEN SEEN TO THIS DEGREE.\*AK**

*G.M. COULD NOT REPRODUCE THIS TO BE A DANGEROUS PROBLEM AND OFFERED NO ASSISTANCE IN MAKING REPAIRS*

CONTINUE 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.