



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 1039

Date Received

13-MAR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8005594

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) (Location at bottom of windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GNEC13R8XJ364739		CHEVROLET TRUCK	TAHOE	1999	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____
					☐ Sport Util ☐ Truck ☐ Motorcycle ☐ Other _____
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06610001	Part Name(s) EXHAUST SYSTEM:MANIFOLD:OXYGEN SENSOR	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) 71 Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN TURNING RIGHT STEERING WHEEL WILL JERK AND VEHICLE WILL ROCK AND SWERVE DUE TO EVO SENSOR MODULE. HAD EVO SENSOR REPLACED. DEALER CONTACTED. *AK

COPIES OF REPORTS ARE KEPT

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
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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 1039

Date Received

13-MAR-2002

Od or
rt dt
od rt
up ltr

Reference No.

8005594

OWNER INFORMATION (Type or Print)

DEFECTS INVESTIGATION

Work Number

Home Number

Do you authorize the manufacturer of your vehicle?
In the absence of the manufacturer, provide your name and address to the vehicle manufacturer.

YES

NO

Signature

Date 3/25/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GNEC13R8XJ364739		CHEVROLET TRUCK	TAHOE	1999	72,000
Purchase Date	Dealer's Name		Engine Size (CID/CC)	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders	8	
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☒ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other
					Body Style
					☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05610004	Part Name(s) EXHAUST SYSTEM MANIFOLD OXYGEN SENSOR EVO Sensor - Controls Power Steering	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No. of Failures Continuous Problem	Date(s) of Failure(s) Started in July 2001 Mileage at Failure(s) 71 (60,000) when started Vehicle Speed at Failure(s) Any speed	Failed Part(s) ☒ Yes ☐ No	NHTSA Previously ☐ Yes ☐ 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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured N/A	Number of Fatalities N/A	Estimated Property Damage N/A	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN TURNING RIGHT STEERING WHEEL WILL JERK AND VEHICLE WILL ROCK AND SWERVE DUE TO EVO SENSOR MODULE. HAD EVO SENSOR REPLACED. DEALER CONTACTED. *AK

*The EVO Sensor Controls the power steering pump. This is not an exhaust sensor. The sensor is located in the steering column near the fire wall on the cabin side.

CONTINUE ON BACK IF NEEDED

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