



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 241**

Date Received

18-APR-2002

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

Reference No.

8007931

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		
1GNDT13SX22304723	CHEVROLET TRUCK	TRAILBLAZER	2002			
Purchase Date <input checked="" type="checkbox"/> New <input 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 checked="" 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 10320000	Part Name(s) VISUAL SYSTEMS:WINDSHIELD WASHER	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-MAR-2002 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)

**CONSUMER STATES THAT THE WASHER DOES NOT SPRAY IN THE MIDDLE OF THE FRONT WINDSHIELD, THE DEALER AND THE MANUFACTURER HAVE BEEN NOTIFIED. NLM**

COPIES OF THIS FORM ARE:

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)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4236

www.nhtsa.dot.gov/hotline

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

## OWNER INFORMATION (Type or Print)

749089

Work No.

8007931

Reference No.

OFFICE OF DEFECTS INVESTIGATION  
20 APR 2002  
18 APR 2002

Date received

Od. or

r. dt

od. r

up. lit

8007931

241

FOR AGENCY USE ONLY

Signature of Owner

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.

Home Number

Vehicle Identification No. (VIN) (located at bottom of windshield on driver's side)

Vehicle Make

Vehicle Model

Vehicle Year

Current Odometer Reading

Purchase Date

Dealer's Name

City

State

Zip Code

Engine Size (CID/CCL)

No. Cylinders

Fuel Injector

Turbo

Diesel

Transmission Type

Antilock Brakes

Restraint System

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Van

Minivan

Other

Sport Utl

Truck

Motorcycle

Body Style

2-Door

4-Door

Pick Up

Truck

Component

Part Name(s)

Location

Failed Part(s)

Original

Replacement

No of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)

Previously

NHTSA

Yes

No

Failed Part(s)

Automatic

Manual

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Motorcyclist

Passenger-side Airbag

Driver-side Airbag

Cruise Control

Drive Type

4-Wheel

Rear

Front

Vehicle Type

Car

Manual

Automatic

Yes

No

3-Point Belt

2-Point Belt

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

WHEN EVER THE FRONT WIND SHIELD WASHER IS TURNED ON TO CLEAN THE WINDSHIELD THE DRIVER'S FRONT WINDOW GETS STREAKED DUE TO A HACK OF WASHER FLUID. THE SPRAY HITS THE TOP 1/3 OF THE WINDOW NEVER WETTING THE OTHER 2/3 OF THE WINDOW ON THE DRIVER'S SIDE.

DEALER STATES THIS IS A GM DESIGN FLAW THAT CANNOT BE CORRECTED. THEY SUGGESTED I WRITE THE NHTSA FOR ACTION.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

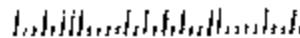
BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.



U.S. Department of Transportation National Highway Traffic Safety Administration DOT Auto Safety Hotline, NSA-10.1 400 7th Street, SW Washington, DC 20590



VEHICLE OWNER'S

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM

OR

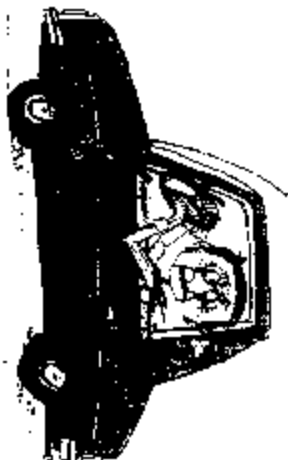
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



U.S. Department of Transportation National Highway Traffic Safety Administration www.nhtsa.gov