 <p>DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p align="center">Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>	<p>FOR AGENCY USE ONLY 1375</p>	
		<p>Date Received: 29-AUG-2002 OFFICE OF DEFECTS INVESTIGATION</p>	<p>Od. or r. dr. _____ od. rt. _____ up. lr. _____</p>
<p>OWNER INFORMATION (Type or Print)</p> <p>FLORAHOME FL</p>		<p>Reference No. 8017615</p>	
<p>Do you authorize NHTSA to provide copies of your responses to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>		<p>Work Number Same</p>	
<p>Signature of Owner _____ Date 09/22/03</p>		<p>Home Number _____</p>	

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

VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading	
2GTEK19R9V1528	GMC	GMC	1997	75,000	
Purchase Date	Dealer's Name		Engine Siz (CID/CC)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio	
2000	BAINBRIDGE MOTORS		5.7L		
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City	State	Zip Code	No Cylinders 8	
Palatka FL	FL				
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other
					<input type="checkbox"/> Sport Ut <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Motorcycle
					<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 01242000	Part Name(s)	Location	Failed Part(s)
	STEERING WHEEL SPEED SENSOR STEERING POSITION SENSOR (ON TOP OF STEERING COLUMN, INSIDE)	<input type="checkbox"/> Left <input checked="" type="checkbox"/> Front	<input type="checkbox"/> Right <input type="checkbox"/> Rear <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	01-AUG-2002	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	0	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No NA

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

WHEN DRIVING AND PREPARES TO TURN CORNER VEHICLE JERKS SUDDENLY INTO TURN. VEHICLE CHECKED BY DEALER, WHO ADVISED CONSUMER THAT STEERING WHEEL SPEED SENSOR IS DEFECTIVE. (AK)

DEALER ADVISED NO PROBLEM, RECOMMENDED ALIGNMENT. (WO VISIT TO DEALER, PHONE CALL ONLY) LOCAL MECHANIC HAD SAME ISSUE WITH HIS PERSONAL VEHICLES, RECOMMENDED REPLACEMENT OF SENSOR. FAILURE IS MANIFESTED BY NEAR CRASH.

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 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.

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

APPARENTLY THE SENSOR FAILS, AND RESULTS IN THE (VARIABLE EFFORT) POWER STEERING SYSTEM GIVING TOO MUCH PRESSURE, CAUSING TRUCK TO DIVE DEEPER INTO CURVE & SEVERAL TIMES I RAN OFF THE ROAD UNEXPECTEDLY. MY WIFE REFUSED TO RIDE IN THE TRUCK

I WOULD RECOMMEND RESEARCHING ALL CRASHES BY TRUCKS THAT SHARE A PLATFORM WITH THIS TRUCK, ESPECIALLY SUBURBAN, TAHOE, FULL SIZE 1500 2500 TRUCKS AND 1500-2500 VANS. I HAVE ASKED SEVERAL OTHER OWNERS EVERYONE I MEET TELLS ME THEIR TRUCK, TAHOE, SUBURBAN DOES THIS. I RECOMMEND TO THEM REPLACEMENT OF THE SENSOR.

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



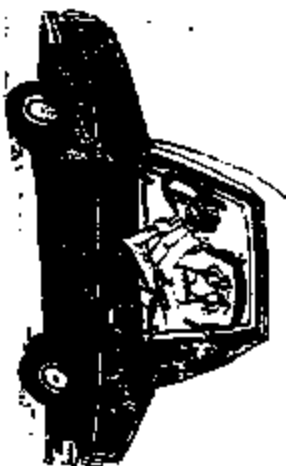
NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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



U.S. Department of Transportation
National Highway Traffic Safety Administration
<http://www.nhtsa.dot.gov/home>



DOT Auto Safety Hotline
(DASH) 2 DOT

1 -DASH-2-DOT
-888-327-4236

ASH2DOT
and dial toll free at

IF VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

TO SAFETY HOTLINE

VEHICLE

OWNER'S

STIONNAIRE