

U.S. Department  
of TransportationNational 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 118

Date Received

24-FEB-2000

Oid\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No.

857478

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>(Listed at front of windshield or drivers side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GKDT13W4T2573883	GMC	JIMMY	1996	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Ult <input 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 Truck <input checked="" type="checkbox"/> Other _____

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

Component 02152000	Part Name(s) SUSPENSION:INDEPENDENT FRONT CONTROL ARM:LOWER:BALL	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
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No. of Failures	Date(s) of Failure(s) 27-NOV-1997 Mileage at Failure(s) 52500 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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## 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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHLE PULLING OUT FROM A PARKING LOT, DRIVING ABOUT 10 MPH, FRONT DRIVER'S SIDE LOWER BALL JOINT POPPED OUT. TRUCK WAS TOWED TO THE DEALERSHIP WHERE REPAIRS WERE MADE AT CONSUMER'S EXPENSE. PLEASE PROVIDE ANY FURTHER INFORMATION. \*AK

CONTINUED ON BACK PLEASE

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.

 <b>DOT Auto Safety Hotline</b> U.S. Department of Transportation National Highway Traffic Safety Administration		<b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		<b>FOR AGENCY USE ONLY 118</b> Date Received <u>24-FEB-2000</u> OFFICE DEFECTS INDEXING SECTION Reference No. <b>857478</b>	
<b>OWNER INFORMATION (Type or Print)</b> [Redacted] <b>592300</b>				Work Number [Redacted] Home Number [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.					
Signature of Owner [Redacted]				Date <u>3/12/00</u>	
<b>VEHICLE INFORMATION</b>					
Vehicle Ident No (VIN) (Located at bottom of windshield on driver's side) <b>1GKDT13W4T2573383</b>		Vehicle Make <b>GMC</b>	Vehicle Model <b>JIMMY</b>	Vehicle Year <b>1996</b>	Current Odometer Reading <b>56,482</b>
Purchase Date <u>1/97</u>	Dealer's Name <del>Exxon</del> <b>Dyer Motors</b> City <u>Riverhead</u> State <u>NY</u> Zip Code <u>11901</u>		Engine Size (CID/CC/L) _____ No Cylinders <u>6</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	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 checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" 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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Component <b>02152000</b>	Part Name(s) <b>SUSPENSION:INDEPENDENT FRONT CONTROL ARM:LOWER:BALL</b>		Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	
No of Failures	Date(s) of Failure(s) <u>27-NOV-1997 1999 NOV 27</u> Mileage at Failure(s) <u>52900</u> Vehicle Speed at Failure(s) _____		Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>APPLICATION INCIDENT INFORMATION</b> (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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>	Estimated Property Damage <u>\$725.00</u>	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>					
<b>WHILE PULLING OUT FROM A PARKING LOT, DRIVING ABOUT 10 MPH, FRONT DRIVER'S SIDE LOWER BALL JOINT POPPED OUT. TRUCK WAS TOWED TO THE DEALERSHIP WHERE REPAIRS WERE MADE AT CONSUMER'S EXPENSE. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK</b>					
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.					





December 7, 1999

Consumer Relations  
31 E. Judson Street  
P.O. Box 436001  
Pontiac, MI 48343

RE: File # 99295511  
VIN #: 1GK1J113W412573883

*To Whom It May Concern:*

*On November 27, 1999 the front driver side lower ball joint came apart on my 1996 Jimmy while I and my family were leaving a parking lot. The vehicle had to be towed approximately 50 miles to the dealer from which the vehicle was purchased in February 1997, Dyer Motors of Riverhead, New York. I live an additional 20 miles further. At the time of this incident the vehicle had 52,900 miles. Subsequent repairs cost \$698.30. (See enclosed invoice copy.)*

*On December 3, 1999 at 3:20 PM EST I reported my concerns to the GMC Customer Assistance Office at 1-800-462-8782 speaking initially with a representative named "Nadesha" and then with a customer manager named "John" and was assigned the above file number.*

*On December 7, 1999 at 5:15 PM EST I made a follow-up call to the Customer Assistance Office and spoke with Ms. Mary Whitfield. Ms. Whitfield informed me that at 10:00 AM EST that morning a notation was made in the file that a phone call was made to me that no cost assistance would be offered because a defect did not exist. I did not receive such a call at home or work.*

*First, I am concerned that had this defect resulted on the expressway on our way home while traveling at 55 mph the resulting accident may have caused serious injury to me and my family as well as to the passengers in surrounding vehicles. I was dismayed to find out that such repairs are not reported to GMC when they occur after the warranty period especially when such a breakdown is so severe and extremely rare.*

*Second, I follow a rigorous maintenance schedule on all my vehicles performed by General Motor mechanics at the dealership of purchase. The annual inspection which occurred in February 1999 for the 1996 Jimmy were performed by these mechanics with no concerns expressed regarding a potential hazard or warning that a repair to the ball*

*joints was needed. Although this 4 wheel drive vehicle is designed and advertised with off road capabilities my wife or I do not use it in such situations.*

*I have purchased four new vehicles from General Motors since 1986 and happily report that I have never experienced such a potentially dangerous vehicle defect. I have tolerated the inconvenience of water leaks, seizing of brakes, head gasket leaks etc. with these vehicles while under warranty. Although I may be inconvenienced, I have accepted that such goes with the ownership of an automobile. However, to be informed that I would not be reimbursed for the above repairs on a vehicle not yet 3 years old when my family and I so narrowly escaped physical injury and be told no defect existed is not acceptable. How else could such a failure to function as designed be described?*

*I have been a loyal customer as evidenced by my recent purchase of a 1999 Bonneville. I look forward to the same loyalty from representatives of General Motors. I have received this loyalty and support from the people at Dyer's Motors when purchasing and servicing my Jimmy. I have the utmost respect for Mr. Dyer for the assistance he provided us during the Thanksgiving Holiday weekend when this breakdown occurred.*

*I look forward to hearing from you within the next two weeks and receiving a check reimbursing us for \$698.30.*

*Sincerely yours,*



*etc.*



**DYER MOTORS**  
 500 Riverleigh Ave. - County Rd. 104  
 516-727-2271  
 RIVERHEAD, N.Y. 11901



CUSTOMER NO 8787	ADVISOR TOM C	1052	TRG NO	INVOICE DATE 11/29/99	INVOICE NO 8CCS30882
	LABOR RATE	123129	52884	COLOR RED/GRAY	STOCK NO
	YEAR MAKE MODEL	96/GMC/JIMMY40 JIMMY 4WD		DATE SOLD 01/27/97	STOCK # MILLS 4007
	VEHICLE ID NO	TGKDT13W4T2573883		SALES DEALER NO 34350	PRODUCTION DATE
	F.T.E. NO.	IP. NO.		S.O. DATE 11/29/99	
		MO: 52887			

JOB# 1 CHARGES		
LABOR		
J# 1 12BUZ	SUSPENSION REPAIRS UNITS: TECH(S)-106R CAR TOOK TO SHOP FRONT BALL JOINT CAME APART. NEED TO REPLACE LEFT UPPER AND LOWER BALL JOINTS, REPLACE ONE STUD ON WHEEL AND REPAIR BROKEN ABS WIRING TO LEFT SPINDLE.	225.00
PARTS		
QTY	FP NUMBER	DESCRIPTION UNIT PRICE
1	2289	JOINT 97.68
1	5320	JOINT 105.31
2	9590476	BOLT 5.812 2.70
1	22526184	NUT-WHL 0.74
		TOTAL - PARTS 265.43
SUBLET	PO#	VEND INV#-INV DATE-DESCRIPTION
	16277	.0 11/29/99 JET TONING
		TOTAL - SUBLET 146.00
MISC	CODE	DESCRIPTION CONTROL NO
		C4 20% PARTS DISCOUNT
		TOTAL - MISC -41.29
JOB# 1 TOTALS		
		LABOR 225.00
		PARTS 265.43
		SUBLET 146.00
		MISC -41.29
JOB# 2 CHARGES		
LABOR		
J# 2-01BUZ00000	ROTATE AND BALANCE UNITS: 1.00 TECH(S)-166R ROTATE AND BALANCE TIRE'S. CHECK TIRE PRESSURE.	40.95
JOB# 2 TOTALS		
		LABOR 40.95
JOB# 3 CHARGES		
LABOR		
J# 3-12BUZ01	TWO WHEEL ALIGNMENT UNITS: 1.20 TECH(S)-106R ALIGNMENT OF FRONT END 2 WHEEL ALIGNMENT ADJUST CASTER AND CAMBER, RESET TOE IN CK TIRE PRESSURE AND CK FRONT END COMPONENTS ALIGNMENT TO SPECS AND COMPLETE ROAD TEST	59.99
JOB# 3 TOTALS		
		LABOR 59.99
JOB# 1 JOURNAL PREFIX GCOS JOB# 1 TOTAL		536.14
JOB# 2 JOURNAL PREFIX GCOS JOB# 2 TOTAL		48.95
JOB# 3 JOURNAL PREFIX GCOS JOB# 3 TOTAL		59.99

ANY WARRANTIES ON THE PRODUCT SOLD HEREBY ARE THOSE MADE BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF SAID PRODUCTS.

LANDS AND PARTS ARE WARRANTED FOR 96 DAYS UP 1000 MILES, WHICHEVER OCCURS FIRST

TERMS: CASH OR CERTIFIED CHECK

CUSTOMER ACKNOWLEDGES RECEIPT OF COPY

**CUSTOMER SATISFACTION IS OUR NUMBER 1 CONCERN**

Thank you  
for this opportunity to serve you.

MYS-MV-RS REG. NO. 87008199

**HOURS OF OPERATION**  
 MONDAY TO FRIDAY  
 8 AM - 5 PM  
 CLOSED FOR LUNCH  
 12 TO 1

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