

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 125

Date Received

02-MAR-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

857760

 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) (located at front of windshield on drivers side) 1GCDK14H6LE116781	Vehicle Make CHEVROLET TRU	Vehicle Model C1500	Vehicle Year 1990	Current Odometer Reading
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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 ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12250000	Part Name(s) INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT BUCKLES	Location ☐ Left ☐ Right ☐ Front ☐ Rear	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) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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)

PASSENGER'S SEAT BELT BUCKLE HAS BROKEN, CAUSING THE SEAT BELT ASSEMBLY TO BECOME INOPERABLE. CONSUMER STATED THAT THE MANUFACTURER NO LONGER MAKES THE PARTS TO CORRECT THE PROBLEM. PLEASE GIVE ANY FURTHER DETAILS. *AK

CONTINUED ON BACK (REVERSE)

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 1-888-327-4238 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 125 Date Received: <u>02-MAR-2000</u> OFFICE OF PUBLIC AFFAIRS INVESTIGATION Reference No. <u>857760</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) 593238			
Do you authorize _____ manufacturer of your vehicle? ☒ YES ☐ NO In the absence of _____ your name and address to the vehicle manufacturer. Signature of Owner _____ Date <u>3/13/00</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>1GCDK14H6LE116781</u>		Vehicle Make <u>CHEVROLET TRU</u> Vehicle Model <u>C1500</u> Vehicle Year <u>1990</u> Current Odometer Reading <u>87,300</u>	
Purchase Date <u>1993</u> ☐ New ☒ Used		Dealer's Name <u>HOWELL MOTORS</u> City <u>NEW FANE</u> State <u>N.Y.</u> Zip Code <u>14108</u> Engine Size (CID/CCIL) <u>305</u> Turbo ☐ No Cylinders <u>8</u> Diesel ☐ Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☒ Yes ☒ No Drive Train ☐ Front ☐ Rear ☒ 4-Wheel
Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other _____		Body Style ☐ Sport Util ☒ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other _____	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>12250000</u>	Part Name(s) <u>INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT BUCKLES</u>	Location ☐ Left ☒ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>2-15-00</u> Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☒ No	NHTSA Previously Contacted? ☐ 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	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
PASSENGER'S SEAT BELT BUCKLE HAS BROKEN, CAUSING THE SEAT BELT ASSEMBLY TO BECOME INOPERABLE. CONSUMER STATED THAT THE MANUFACTURER NO LONGER MAKES THE PARTS TO CORRECT THE PROBLEM. PLEASE GIVE ANY FURTHER DETAILS. *AK <i>This truck only has 87,000mi. you can't buy one (SEAT BELT) 1988 to 1991 fits this truck. How can justify this when these trucks run for 200,000 Road worthy miles or more.</i>			
CONTINUE ON BACK IF NEEDED			
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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

This is a safety, This is a N.Y. STATE LAW.
FINES RANGE BETWEEN \$50 & \$80, plus it goes
against your Car INSURANCE

2059070001

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U.S. Government Printing Office: 1995 — 623-090

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

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
Auto Safety Hotline, NEF-11 HL
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
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