

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

18-JUN-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

863683

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 vehicle or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	CHEVROLET	CELEBRITY	1989	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	☐ 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	Body Style
☐ 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 Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12250000	Part Name(s) INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT BUCKLES	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) 15-JUN-2000 Mileage at Failure(s) 30600 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

SEAT BELT ON THE DRIVER'S SIDE WOULD NOT UNLATCH, AND WAS NO LONGER FUNCTIONING. SEAT BELT HAD TO BE CUT. DEALER WAS NOTIFIED ABOUT THE PROBLEM. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

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.

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DO JUL 10 AM 10:11
16-JUN-2000OFFICE
DEFECTS INVESTIGATION
 Od_or _____
 dt _____
 od_it _____
 up_itr _____

Reference No.

853683

OWNER INFORMATION (Type or Print)

614563

Work Number

Home Number

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 6/26/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)

1G1AW51W5K6142974

Vehicle Make

CHEVROLET

Vehicle Model

CELEBRITY

Vehicle Year

1989

Current Odometer Reading

Purchase Date

6-15-98

Dealer's Name Turner Chevrolet

Engine Size
(CID/CC/L)
☐ Turbo
☐ Diesel
☐ Gas
☒ Fuel Injection
☐ New ☒ Used

City Park Hills State MO Zip Code 63601

No Cylinders 6

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 Utl ☐ Truck ☐ Motorcycle ☐ 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 ☒ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 15-JUN-2000 Mileage at Failure(s) 30000 Vehicle Speed at Failure(s) Stopped	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 \$10000	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

SEAT BELT ON THE DRIVER'S SIDE WOULD NOT UNLATCH, AND WAS NO LONGER FUNCTIONING. SEAT BELT HAD TO BE CUT. DEALER WAS NOTIFIED ABOUT THE PROBLEM. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

There was no accident or injury. I cannot drive vehicle due to law on seatbelts. I have checked with dealer and with Seboage lot and found another replacement. So purchase said replacement and get it installed will cost at least \$1000 plus not having the use of car until it is done. I am a widow on fixed income and I don't have \$ to get it done. Please advise.

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