

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 231

Date Received

26-JUN-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

864231

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)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	CHEVROLET TRU	SUBURBAN	1994	

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 10312000	Part Name(s) VISUAL SYSTEMS:WINDSHIELD WIPER:MOTOR	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)

WHILE ENGAGING WINDSHIELD WIPERS THEY WOULD STOP WORKING INTERMITTENTLY AND WITHOUT INDICATION. PLEASE PROVIDE FURTHER INFORMATION.*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.

 U.S. Department of Transportation National 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 231 Date Received RECEIVED 00 AUG - 7 9 33 26 JUN-2000 OFFICE DEFECTS INVESTIGATION 864231	
OWNER INFORMATION (Type or Print) 616956				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 7/27/00					
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 16NFK16K5RT306404		Vehicle Make CHEVROLET TRU		Vehicle Model SUBURBAN	
Vehicle Year 1994		Current Odometer Reading 85,438			
Purchase Date 2/97 ☐ New ☒ Used		Dealer's Name Rugis City Rhinebeck State NY Zip Code 12580		Engine Size (CID/CC/L) 1500 No Cylinders 8 ☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☐ Yes ☒ No		Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	
Cruise Control ☐ Yes ☒ No		Drive Train ☐ Front ☐ Rear ☒ Wheel		Vehicle Type ☐ Car ☐ Sport Util ☐ 2-Door ☐ Van ☐ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☒ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 10312000		Part Name(s) VISUAL SYSTEMS: WINDSHIELD WIPER: MOTOR		Location ☐ Left ☐ Right ☒ Front ☐ Rear	
No of Failures constant		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	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
WHILE ENGAGING WINDSHIELD WIPERS THEY WOULD STOP WORKING INTERMITTENTLY AND WITHOUT INDICATION. PLEASE PROVIDE FURTHER INFORMATION.*AK Continually stop (windshield wipers) stop working when in use at various speeds (intermittent or constant). Extremely dangerous as weather is precarious and vision becomes severely decreased. This is a known problem.					
CONTINUE ON BACK IF NEEDED					
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