
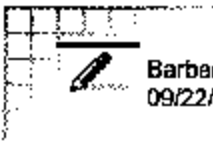
 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline</p> <h2>Vehicle Owner's Questionnaire (VOQ)</h2> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p><b>FOR AGENCY USE ONLY</b> 335</p>			
<p>OWNER INFORMATION (Type or Print)</p> <p><b>GRADIE</b> <b>HOLDER</b> <b>630007</b></p> <p><b>162 EDISON</b></p> <p><b>PONTIAC</b> <b>MI</b> <b>48342</b></p>		<p>Date Received</p> <p><b>23-AUG-2000</b></p>		<p>Od_ or _____ rt_ dt _____ od_ rt _____ up_ ltr _____</p> <p>Reference No.</p> <p><b>868475</b></p>			
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.</p> <p>Signature of Owner _____ Date ____/____/____</p>		<p>Work Number _____</p> <p>Home Number <b>248-334-0527</b></p>					
<p align="center"><b>VEHICLE INFORMATION</b></p>							
<p>Vehicle Ident. No. (VIN.) (located at bottom of windshield or driver's side)</p> <p><b>1GKDM15ZXHB535926</b></p>		<p>Vehicle Make</p> <p><b>GMC</b></p>	<p>Vehicle Model</p> <p><b>SAFARI</b></p>	<p>Vehicle Year</p> <p><b>1987</b></p>	<p>Current Odometer Reading</p>		
<p>Purchase Date</p> <p><input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>		<p>Dealer's Name _____</p> <p>City _____ State _____ Zip Code _____</p>		<p>Engine Size (CID/CCL) _____</p> <p>No. Cylinders _____</p> <p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection</p>			
<p>Transmission Type</p> <p><input type="checkbox"/> Manual <input type="checkbox"/> Automatic</p>	<p>Antilock Brakes</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Restraint System</p> <p><input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag</p> <p><input type="checkbox"/> Introlubell <input type="checkbox"/> 2-Point Belt</p>		<p>Cruise Control</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Drive Train</p> <p><input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>	<p>Vehicle Type</p> <p><input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle</p>	<p>Body Style</p> <p><input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____</p>
<p align="center"><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>							
<p>Component</p> <p><b>06420000</b></p>	<p>Part Name(s)</p> <p><b>FUEL THROTTLE LINKAGES; ACCELERATOR; RIGID</b></p>		<p>Location</p> <p><input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear</p>		<p>Failed Part(s)</p> <p><input type="checkbox"/> Original <input type="checkbox"/> Replacement</p>		
<p>No. of Failures</p> <p><b>0</b></p>	<p>Date(s) of Failure(s) <b>01-AUG-2000</b></p> <p>Mileage at Failure(s) <b>50000</b></p> <p>Vehicle Speed at Failure(s) <b>?</b></p>		<p>Failed Part(s) Available?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>NHTSA Previously Contacted?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p align="center"><b>APPLICATION INCIDENT INFORMATION</b></p> <p>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)</p>							
<p>Crash</p>	<p>Fire</p>	<p>Number of Persons Injured</p>	<p>Number of Fatalities</p>	<p>Estimated Property Damage</p>	<p>Reported to Police</p>		

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline <b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p><b>FOR AGENCY USE ONLY</b> 335 Date Received 23-AUG-2000 OFFICE S INVESTIGATION</p>	
<p>OWNER INFORMATION (Type or Print)</p>				<p>Reference No. 868475</p>	
<p>630007</p>				<p>Work Number Home Number</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of _____ address to the vehicle manufacturer. Signature of Owner _____ Date 9/21/00</p>					
<p><b>VEHICLE INFORMATION</b></p>					
<p>Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1GKDM15ZXHB535926</p>		<p>Vehicle Make GMC</p>	<p>Vehicle Model SAFARI</p>	<p>Vehicle Year 1987</p>	<p>Current Odometer Reading 73345.8</p>
<p>Purchase Date 1991</p>		<p>Dealer's Name Al Dittreich Olds, GMC</p>		<p>Engine Size (CID/CYL) _____ No. Cylinders _____</p>	
<p><input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>		<p>City Watsford State MI Zip Code 48326</p>		<p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection</p>	
<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>	<p>Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt</p>		<p>Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>
<p>Vehicle Type <input type="checkbox"/> Car <input checked="" type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other</p>		<p>Sport Util Truck <input type="checkbox"/> Motorcycycle</p>		<p>Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other Mini VAN</p>	
<p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>					
<p>Component 65420000</p>	<p>Part Name(s) FUEL:THROTTLE LINKAGES:ACCELERATOR:RIGID</p>		<p>Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear</p>		<p>Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement</p>
<p>No of Failures 0 2</p>	<p>Date(s) of Failure(s) 01-AUG-2000 - July 15-2000</p>		<p>Mileage at Failure(s) 50000</p>		<p>Vehicle Speed at Failure(s) 0</p>
<p>Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p><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)</p>					
<p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured 0</p>	<p>Number of Fatalities 0</p>	<p>Estimated Property Damage Not yet determined extensive</p>	
<p>Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>					
<p><b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b></p>					
<p>CONSUMER WAS BACKING INTO GARAGE, PUT GEAR SHIFT INTO PARK AND VEHICLE TOOK OFF BACKWARDS SECOND TIME WHILE WAITING FOR SOME PEOPLE TO CROSS. CONSUMER'S FOOT WAS STILL ON THE BRAKES AND TIRES WERE SPINNING. CONSUMER HAD TO PUT CAR IN NEUTRAL TO GET IT TO STOP.*AK</p>					
<p>CONTINUE ON BACK IF NEEDED</p>					
<p>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.</p>					



Barbara L Walsh  
09/22/2000 12:01 PM

To: <http://www.nhsta.dot.gov>

cc:

Subject: Vehicle into open throttle

To whom it may concern:

I am writing this for my mother, because she does not have access to a computer.

Owner:

Address:

Phone:

Vin # - 1GKDM15ZXHB535826

Model - Safari

Make - GMC

Year - 1987

Odom- 73,345.8

Vehicle was purchased in 1991 - The vehicle in question was purchased from Al Dittrich GMC. It was a DEMO vehicle with a full warranty.

**Failure # 1 - July 16, 2000 (Saturday) Weather condition: Sunny and Warm**

I was backing up into the drive way ( as I always do). The van seemed to bog down. I was stopped at a rail barrier approx. two feet from the garage. I attempted to place the vehicle into park when the vehicle launched backward over the barrier hitting the building. There was minimal damage to the building, but the bumper was bent enough where I could not open the back doors to the van. There were no injuries.

**Failure # - 2 - August 3, 2000 ( Thursday) Weather condition: Sunny and Warm**

I was pulling forward into the driveway slowly, because there were a couple of people crossing in front of the garage. The vehicle stopped on its own approx. 12-15 feet from the building. ( I was still coasting in) Once the vehicle stopped on its own, the motor seemed to bog down again, and then it launched forward at a full acceleration, over the barrier, and into the building. I attempted to brake, but the brake would not depress (it was stiff because of the high acceleration) The van stopped only when it hit a brick chimney and a 1500 LB commercial lathe. The motor was still at full throttle (tires squealing and burning), and the brake would still not depress when I attempted to turn the motor off. The only way I could turn the vehicle off while it was in gear would not go into park), was to put the vehicle into "neutral". of which the brake was still frozen. There was extensive damage to the vehicle and building. There were no injuries other than bruising where the seat belt went across my belly.

Both incidents were in the same time frame of 10 seconds. There was no reaction time on either incident except when the driver tried to stop, the brakes were frozen, and the vehicle would not stop.

I am afraid to drive the vehicle, of which has been sitting in my driveway since the accident. I am just glad I was at home when this happened, I could have been killed or killed someone else at an intersection with a uncontrolled high acceleration with no chance of stopping the vehicle. I will be sending the required paperwork to you with in a couple of days.

Please advise to this concern

Barbara Walsh (daughter) for [REDACTED]

*Barbara L. Walsh*

DaimlerChrysler Supplier Quality  
Park Brakes and Cables  
CIMS 434-03 12 N4001 N5 W3 Cube 84  
248-576-1690 (ph) 248-576-2017 (fax)



## Office of Defects Investigation Complaints Database

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Call the **Auto Safety Hotline** toll free at (888) 327-4236 to report safety defects or to obtain information on cars, trucks, child seats, highway or traffic safety.

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**Report Date: August 22, 2000 11:32:04 AM**

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ODI ID: 964549

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Friday, April 21, 1995

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: WHEN STARTING VEHICLE, THE CAR WAS AT FULL THROTTLE, WENT OUT OF CONTROL AND CRASH INTO LIGHT POLE. TT

---

ODI ID: 948932

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Friday, May 06, 1994

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: VEHICLE WENT INTO OPEN THROTTLE POSITION, IMPACT 12:00 POSITION, SPEED UNKNOWN, LOST CONTROL HITTING A BUILDING. TT

---

ODI ID: 909314

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Friday, August 30, 1991

Incident: No

Fire: No

Number of Injuries: 1

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: UPON MOVING GEARS FROM PARK TO DRIVE VEHICLE SUDDENLY ACCELERATED, WENT OUT OF CONTROL, PASSENGER WAS THROWN INTO FRONT WINDSHIELD AND SUFFERED HEAD INJURY. AK

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ODI ID: 388158

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Monday, July 29, 1991

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: WHILE PULLING OUT OF GARAGE VEHICLE SUDDENLY ACCELERATED OUT OF CONTROL, RESULTED IN AN ACCIDENT. AK

---

ODI ID: 908745

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Friday, July 26, 1991

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: UPON SHIFTING FROM PARK TO DRIVE, VEHICLE SUDDENLY ACCELERATED WHICH RESULTED IN AN ACCIDENT. AK

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ODI ID: 902438

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Monday, October 29, 1990

Incident: No

Fire: No

Number of Injuries: 1

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: VEHICLE SUDDENLY ACCELERATED WHEN SHIFTED FROM PARK TO DRIVE, STOPPED WHEN VEHICLE COLLIDED WITH HOUSE. DG

---

ODI ID: 361699

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Saturday, March 17, 1990

Incident: No

Fire: No

Number of Injuries: 3

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: ACCELERATOR STUCK, STARTED VAN, PUT IN GEAR, VAN SHUT OFF. TLH

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ODI ID: 336279

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Saturday, July 15, 1989

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: LOSS OF CONTROL OF ACCELERATOR WHILE PARKING, CAUSED ACCIDENT, SEVERAL TIMES CAR ACCELERATED INVOLUNTARILY WHILE DRIVING. MM

---

ODI ID: 336338

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Saturday, July 15, 1989

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: WHILE IN PROCESS OF PARKING, VAN LURCHED FORWARD SUDDENLY RESULTING IN ACCIDENT. MTH

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ODI ID: 335114

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Sunday, June 25, 1989

Incident: No

Fire: No

Number of Injuries: 1

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: VEHICLE PROCEEDED FORWARD FROM COMPLETE STOP, WHEN TRANSMISSION WAS PUT INTO DRIVE, ACCELERATOR WAS NOT DEPRESSED, RESULTED IN ACCIDENT. MM

---

ODI ID: 323038

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Saturday, November 19, 1988

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: EXITING SHOPPING AREA, SUDDEN UNCONTROLLABLE ACCELERATION AT SUCH FORCE, VAN SPUN 180 DEGREES, STRUCK TWO POLES BEFORE STOPPING. MM

---

ODI ID: 322681

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Thursday, October 13, 1988

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: UPON PLACING GEAR IN DRIVE, CAR SUDDENLY ACCELERATED, BRAKES FAILED, NO VACCUM ON POWER BRAKES, RESULTED IN ACCIDENT. BG

---

ODI ID: 316948

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Monday, June 20, 1988

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: UPON SHIFTING INTO DRIVE VAN SUDDENLY ACCELERATED INTO ANOTHER CAR. EC

---

ODI ID: 315518

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Wednesday, April 20, 1988

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: SUDDEN ACCELERATION WHILE ENTERING HIGHWAY, ENGINE MAKING LOUD NOISE, TURNED KEY OFF TO STOP ACCELERATION. LMH

---

ODI ID: 301273

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Monday, September 21, 1987

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: SUDDEN ACCELERATION CAUSING LOSS OF CONTROL, BRAKES COULD NOT STOP VEHICLE, RESULTED ACCIDENT. DB

---

ODI ID: 300288

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Tuesday, July 07, 1987

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: SUDDEN ACCELERATION FROM A DEAD STOP, RESULTED ACCIDENT. CM

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ODI ID: 300294

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Tuesday, July 07, 1987

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: VEHICLE SUFFERED SUDDEN ACCELERATION, APPARENTLY DUE TO STICKING & BINDING OF THROTTLE LINKAGE, AN ACCIDENT RESULTED. GD

---

ODI ID: 302382

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Wednesday, March 18, 1987

Incident: No

Fire: No

Number of Injuries: 1

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: UPON STARTING, VEHICLE ACCELERATED IN REVERSE WITHOUT DEPRESSING GAS PEDAL, WITH BRAKES ON, WHEEL SLIDING, CAME TO REEST AGAINST A FENCE. MTH

---

ODI ID: 313877

Make: CHEVROLET TRUCK

Model: ASTRO

Year: 1987

Date of Failure: Sunday, March 01, 1987

Incident: No

Fire: No

Number of Injuries: 0

Component: FUEL:THROTTLE LINKAGES AND CONTROL

Summary: VEHICLE DECELERATES AND RETURNS TO ACCELERATION MODE, ENGINE SURGES CAUSING SUDDEN JERK IN DRIVE TRAIN. LMH

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This search returned 19 records.

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