

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 150

Date Received

06-OCT-2000

Oid_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

872452

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
1GTEC19M8TE512945	GMC	SIERRA	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 type="checkbox"/> New <input checked="" 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 type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input checked="" type="checkbox"/> Yes <input 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 10312000	Part Name(s) VISUAL SYSTEMS:WINDSHIELD WIPER:MOTOR	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <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) _____ Mileage at Failure(s) 90000 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)

WINDSHIELD WIPERS INTERMITTENTLY FAIL DURING OPERATION OR THEY WILL NOT TURN ON AT ALL, CAUSING POOR VISIBILITY. VEHICLE WAS NOT INCLUDED IN RECALL 98V150001 DUE TO VIN ALTHOUGH IT HAD THE SAME DEFECT.*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.

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 160</p> <p>Date Received: 09 OCT 25 04 2000 09 OCT 2000</p> <p>OFFICE OF INVESTIGATION</p>		<p>Defect No. _____ rt_dt _____ od_rl _____ up_nr _____</p> <p>Reference No. 872452</p>	
<p>OWNER INFORMATION (Type or Print)</p> <p>644683</p>				<p>Work Number _____ Home No. _____</p>		<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of an authorized NHTSA NHTSA NHTSA name and address to the vehicle manufacturer.</p> <p>Signature of Owner _____ Date 10/17/00</p>	
<p>VEHICLE INFORMATION</p>							
<p>Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side)</p> <p>1GTEC19M8TE512945</p>		<p>Vehicle Make</p> <p>GMC</p>	<p>Vehicle Model</p> <p>SIERRA</p>	<p>Vehicle Year</p> <p>1996</p>	<p>Current Odometer Reading</p> <p>130,000</p>		<p>Purchase Date</p> <p>FEB '99</p>
<p>Dealer's Name _____ City _____ State _____ Zip Code _____</p>		<p>Engine Size (CID/CC/L) 30516 No Cylinders 6</p>		<p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection</p>		<p><input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>	<p>Transmission Type</p> <p><input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>
<p>Antilock Brakes</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System</p> <p><input type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag</p>		<p>Cruise Control</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Drive Train</p> <p><input checked="" type="checkbox"/> Front <input checked="" 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>Body Style</p> <p><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</p>
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>							
<p>Component</p> <p>10312800</p>	<p>Part Name(s)</p> <p>VISUAL SYSTEMS:WINDSHIELD WIPER: MOTOR</p>			<p>Location</p> <p><input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear</p>		<p>Failed Part(s)</p> <p><input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement</p>	
<p>No of Failures</p> <p>NUMEROUS</p>	<p>Date(s) of Failure(s) NUMEROUS Mileage at Failure(s) 80000 Vehicle Speed at Failure(s) _____</p>			<p>Failed Part(s) Available?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>NHTSA Previously Contacted?</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>APPLICATION INCIDENT INFORMATION (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><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Fire</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Number of Persons Injured</p> <p>_____</p>	<p>Number of Fatalities</p> <p>_____</p>	<p>Estimated Property Damage</p> <p>_____</p>	<p>Reported to Police</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p> <p>WINDSHIELD WIPERS INTERMITTENTLY FAIL DURING OPERATION OR THEY WILL NOT TURN ON AT ALL, CAUSING POOR VISIBILITY. VEHICLE WAS NOT INCLUDED IN RECALL 98V150001 DUE TO VIN ALTHOUGH IT HAD THE SAME DEFECT.*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>							