Form Approved O.M.B. No. 2127-0008

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 858

Date Received: 10-JAN-2001

Od_or
rt_dt
od_rt
up_ltr

Reference No. 877896

OWNER INFORMATION (Type or Print)

[redacted] 666064

Work Number

Home Number [redacted]

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 bottom of windshield on driver's side)	Vehicle Mak	Vehicle Mode	Vehicle Year	Current Odometer Readin
1GYEK63RXYR171434	CADILLAC TRUCK	ESCALADE	2000	

Purchase Date

☒ New ☐ Used

Dealer's Name _____

City State Zip Code _____

Engine Siz (CID/CC/L ____
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Uti ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
02600000	WHEELS	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures		Failed Part(s)	NHTSA Previously
	Date(s) of Failure(s) 27-DEC-2000 Mileage at Failure(s) 20 Vehicle Speed at Failure(s) _____	☐ Yes ☐ No	☐ 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 Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

WHILE TRAVELING 35MPH REAR END OF VEHICLE 'FISH-TAILED' 360 DEGREES. UPON VISUAL INSPECTION, CONSUMER NOTICED THAT WHEEL HAD BROKEN COMPLETLETLY OFF. *AK

CONTINUE ON BACK IF NEEDED

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Date Received: 10-JAN-2001

Odi_or
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odi_rt
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Reference No. 877696

OWNER INFORMATION (Type or Print)

[redacted] 666054

Work Number

Home Numb[redacted]

Do you authorize [redacted] in the absence of [redacted] manufacturer of your vehicle? your name and address to the vehicle manufacturer. ☐ YES ☐ NO

Signature of Owne[redacted] Date 3/5/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GYEK63RXYR171434	CADILLAC TRUC	ESCALADE	2000	20,000

Purchase Date: 3-00 ☒ New ☐ Used

Dealer's Name: TUTTLE-CLARK CADILLAC
City: ENGLS. State: IN. Zip Code: 46240-0158

Engine Size (CID/CC/L): ____ No Cylinders: ____
☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☒ 4-Wheel	☐ Car ☒ Sport Ut ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
02600000	WHEELS	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures		Failed Part(s) Available?	NHTSA Previously Contacted?
	Date(s) of Failure(s): 27-DEC-2000 Mileage at Failure(s): 20 Vehicle Speed at Failure(s): 30 MPH OR LESS	☐ Yes ☐ No	☒ 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			$8,000-$9,000	☐ Yes ☒ No

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

WHILE TRAVELING 35MPH REAR END OF VEHICLE 'FISH-TAILED' 360 DEGREES. UPON VISUAL INSPECTION, CONSUMER NOTICED THAT WHEEL HAD BROKEN COMPLETLETLY OFF. *AK

CONTINUE ON BACK IF NEEDED