

 <p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		FOR AGENCY USE ONLY 117	
		Date Received 16-JAN-2001	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
OWNER INFORMATION (Type or Print)		Reference No. 878241	
[Redacted] 666818		Work Number _____ Home Number [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> 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>(Located at bottom of windshield on driver's side)</small> 1GNFK16K4SJ355762	Vehicle Mak CHEVROLET TRUC	Vehicle Mode SUBURBAN	Vehicle Year 1995
Purchase Date _____		Current Odometer Readin _____	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Siz (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	Cruise Contrls <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Drive Trai <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <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
			Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input checked="" type="checkbox"/> Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component: 03250000 03270000	Part Name(s) BRAKES:HYDRAULIC:ANTI-SKID SYSTEM BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) 08-DEC-2000 Mileage at Failure(s) 85 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <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 Fatalitie
		Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
<p>WHILE GOING 40MPH ANOTHER VEHICLE IN FRONT SLAMMED ON BRAKES. CHEVROLET'S DRIVER APPLIED BRAKES & ABS LIGHT CAME ON. PUMPED BRAKES 3 TIMES AND ALL WHEELS LOCKED UP. VEHICLE WENT INTO A SKID. THEN INTO THE LEFT HAND LANE. TOOK FOOT OFF BRAKES TO COME OUT OF SKID. VEHICLE FINALLY STOPPED. TOOK VEHICLE BACK TO DEALERSHIP & HAD IT CHECKED. NOTICED ROTOR BROKE IN HALF, IT WAS NOT CORRODED. PADS SITTING ON MOUNTING HAD BROKE AWAY FROM EACH OTHER. *AK</p>			
CONTINUE ON BACK IF NEEDED			
<p>The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to a 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>			