



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY

130

Date Received

22-JAN-2001

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ip_ltr

Reference No.

878706

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 Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3GNFK16R5XG192223	CHEVROLET TRU	SUBURBAN	1999	
Purchase Date ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No. Cylinders _____	☐ 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 ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12342000	Part Name(s) INTERIOR SYSTEMS: TRACKS AND ANCHORS: FRONT SEAT: POWER	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)

CONSUMER WAS DRIVING AND EXPERIENCED OTHER RELATED PROBLEMS DUE TO COLD WEATHER. CONSUMER EXITED VEHICLE TO RESOLVE PROBELMS. AS VEHICLE WAS PARKED WITH ENGINE RUNNING, A FIRE STARTED POSSIBLY DUE TO ELECTRIC HEATED DRIVER'S SEAT WHICH WAS TOLD BY FIRE DEPARTMENT. VEHICLE WAS TOTALED. ABOUT 5 DAYS PRIOR TO INCIDENT, CONSUMER NOTICED SEAT WAS GETTING EXTREMELY HOT INTERMITTENTLY. THERE WAS NO CHANCE TO TAKE VEHICLE IN TO DEALER.*AK

CONTINUE ON BACK IF NEEDED

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.



Vehicle Owner's Questionnaire (VOQ)

DOT Auto Safety Hotline

U.S. Department of Transportation
National Highway Traffic Safety Administration

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

688450

Work Number

Home Number

Reference No. 878706

Date Received
22-JAN-2001
2:00 PM '01

FOR AGENCY USE ONLY 160

Form Approved: O M B No. 2127-0008

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 1G1FK16R5XG192223

Vehicle Make CHEVROLET TRU

Vehicle Model SUBURBAN

Vehicle Year 1999

Current Odometer Reading 26,000

Purchase Date 06/1999
New ☒ Used ☐

Dealer's Name Gary's Chevrolet
City Gary State AL Zip Code 36033

Engine Size 3.2 CID/CYL
No Cylinders 8

Fuel Injection Turbo Diesel Gas
Pick Up Truck

Transmission Type Automatic

Antilock Brakes Yes ☒ No ☐

Restraint System 3-Point Belt

Motorcycle 2-Point Belt

Cruise Control Yes ☒ No ☐

Drive Train Front

4-Wheel

Vehicle Type Car

Sport Utility

Body Style 2-Door

Component 12312000

Part Name(s) INTERIOR SYSTEMS: TRACKS AND ANCHORS: FRONT SEAT: POWER

Location Left

Failed Part(s) R right

Failed Part(s) Original Replacement

No of Failures 1

Date(s) of Failure(s) 16-DEC-2000

Mileage at Failure(s) 28000

Vehicle Speed at Failure(s)

Failed Part(s) Available? Yes ☒ No ☐

Contacted? Yes ☒ No ☐

NHTSA Previously Reported to Police 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 ☒ File Yes ☒ No ☐ Number of Persons Injured ~~3~~ Number of Fatalities Estimated Property Damage \$31,000.00 Reported to Police Yes ☒ No ☐

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

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