



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 758

Date Received

27-MAR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

884352

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
ADD	GMC	SIERRA	1997			
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 Injectio			
<input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	<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"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07300000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Date(s) of Failure(s) 05-MAR-2001 47000	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s)		

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 Damag	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)

WHILE DRIVING ABOUT 20 MPH CONSUMER HEARD A NOISE AND VEHICLE SLOWED DOWN,
TRANSMISSION HAD GONE OUT. *AK

COPIES OF THIS FORM ARE:

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.

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Date Received: 27-MAR-2001
 Pd. or r. d. of od. fr. up. fr.

Reference No. 884352

Work No. [REDACTED]
 Home No. [REDACTED]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

Signature of Owner: [REDACTED] Date: 4/11/01

OWNER INFORMATION (Type or Print)
 683096 [REDACTED]

Vehicle Owner's Questionnaire (VOQ)
 U.S. Department of Transportation
 National Highway Traffic Safety Administration
 www.nhtsa.dot.gov/hotline
 1-888-327-4236
 NATIONWIDE 1-888-DASH-2-DOT

VEHICLE INFORMATION

Vehicle Ident. No. (VIN): [REDACTED] (Located at bottom of windshield on driver's side)

Vehicle Make: GMC Vehicle Model: SIERRA Vehicle Year: 1997

Current Odometer Reading: [REDACTED]

Dealers Name: MARINA MOTORS City: CARROLLA State: GA Zip Code: [REDACTED]

Purchase Date: 1/31/97

Engine Size (CID/CCL): 5.7L No Cylinders: 8

Fuel Injection: Gas Diesel Turbo

FAILED COMPONENT(S)/PART(S) INFORMATION

Transmits on Type: Automatic Manual

Antilock Brakes: Yes No

Restraint System: 3-Point Belt Motorbelt 2-Point Belt

Driver's Side Airbag: Passenger's Side Airbag:

Cruise Control: No Yes

Drive Train: Front Rear 4-Wheel

Vehicle Type: Car Van Minivan Other Truck Motorcycle

Body Style: 2-Door 4-Door Station Wagon Pick Up Truck Other

Component 07300000

Part Name(s) POWER TRAIN: TRANSMISSION: AUTOMATIC

Location Center Left Right Rear

Failed Part(s) Original Replacement

No of Failures 1

Date(s) of Failure(s) 05-MAR-2001

Mileage at Failure(s) 47000

Vehicle Speed at Failure(s) 20 MPH

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 Injuries) on the back of this form)

Crash Yes No

Fig. Yes No

Number of Persons Injured

Number of Fatalities

Estimated Property Damage

Reported to Police Yes No

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

TRANSMISSION HAD GONE OUT. *AK
 WHILE DRIVING ABOUT 20 MPH CONSUMER HEARD A NOISE AND VEHICLE ~~SHUT DOWN~~
 WOULD NOT SHIFT INTO 2ND, 4TH, REVERSE AND HAD NO COMPRESSION
 PARKING ON A DOWN HILL
 CONTINUED ON REAR

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.

CONTINUE ON BACK IF NEEDED

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PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)**

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