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 284

Date Received: 23-MAY-2001

Od_or
rt_dt
od_rt
np_ltr

Reference No.: 888968

[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.) (Locate at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1GKDM19W7TB535164	GMC	SAFARI	1996	

Purchase Dat: ☒ New ☐ Used

Dealer's Name_____

City_____ State_____ Zip Code_____

Engine Size (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 Ult ☒ 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
13400000	STRUCTURE:DOOR ASSEMBLY	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s) 90 Mileage at Failure(s)_____	Failed Part(s)	NHTSA Previously
		☐ 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)

SLIDING DOOR DOES NOT SIT ON TRACK PROPERLY. INTERMITTENTLY DOOR IS INOPERABLE. DEALER HAS REPAIRED VEHICLE SEVERAL TIMES.*AKI

CONTINUED ON REVERSE

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 284

Date Received: RECEIVED
01 JUL 11 AM 7:29
23-MAY-2001
OFFICE DEFECTS INVESTIGATION

Odi_or ____ ____
rt_dt ____ ____
odi_rt ____ ____
up_ltr ____ ____

Reference No.
888968

OWNER INFORMATION (Type or Print)

[redacted] 693575

Work Numbe [redacted]
Home Numbe [redacted]

Do you authorize NHTSA to provide a copy of your report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of a [redacted] T provide your name and address to the vehicle manufacturer.

Signature of Owne [redacted] Date 6/14/01

VEHICLE INFORMATION

Vehicle Iden. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GKDM19W7TB535164	GMC	SAFARI	1996	

Purchase Date 6/96
☒ New ☐ Used

Dealer's Name WESTMINSTER GMC/PONTIAC
City WESTMINSTER State CA Zip Code 92683

Engine Size (CID/CC/L) 4.3
No Cylinders 6
☐ 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 Utl ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other VAN

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
13400000	STRUCTURE:DOOR ASSEMBLY SLIDING-SIDE	☐ Left ☒ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
18	1996 TO PRESENT 2001 / 90 15,000 / N/A	☐ 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	2	0	700	☐ Yes ☒ No

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

SLIDING DOOR DOES NOT SIT ON TRACK PROPERLY. INTERMITTENTLY DOOR IS INOPERABLE. DEALER HAS REPAIRED VEHICLE SEVERAL TIMES.*AKI

15+

DOOR WILL NOT OPEN WITHOUT BANGING - SAFETY HAZARD
CHILDREN CANNOT OPEN DOOR. IT HAS BEEN IN FOR REPAIR
15+ TIMES SINCE NEW. NEVER COMPLETELY FIXED.

CONTINUE ON BACK IF NEEDED