Form Approved: OMB No. 2127-0001

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 336

Date Received: 19-JUL-2001

Od_or
rt_dt
od_rt
np_ltr

Reference No.: 893084

[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
	CHEVROLET TRUC	BLAZER	2000	

Purchase Dat		Engine Size	
☐ New ☒ Used	Dealer's Name_____ City_____ State_____ Zip Code_____	(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 Utl ☐ 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
09006000	LIGHTING:GENERAL OR UNKNOWN COMPONENT:BRAKE LIGHT:	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
0	15-JUL-2001	0	☐ 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	0	0		☐ Yes ☒ No

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

BRAKE LIGHTS WILL NOT LIGHT UP. POLICE HAS PULLED VEHICLE OVER FOR BRAKE LIGHTS NOT BEING ON. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

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 335

Date Received: 19-JUL-2001
01 AUG 27 P1 1
OFFICE DEFECTS INVESTIGATION

Od_or
rt_dt
od_rt
up_ltr

Reference No. 893084

OWNER INFORMATION (Type or Print)

[redacted] 703260

Work Numb [redacted]
Home Number

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.) (Location at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GNCS13W1YK 146377	CHEVROLET TRU	BLAZER	2000	39,502

Purchase Date 12/2/99 ☐ New ☒ Used

Dealer's Name Stewart Chevrolet
City Daly City State CA Zip Code 94015

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 ☐ 2-Point Belt ☒ Driverside Airbag ☒ Passengerside Airbag	☒ Yes ☒ No	☒ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☒ Truck ☐ Van ☐ 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)
86006000	LIGHTING:GENERAL OR UNKNOWN COMPONENT:BRAKE LIGHTS	☐ Left ☐ Front ☒ Right ☒ Rear	☒ Original (both) ☒ Replacement

No of Failures: 2

Date(s) of Failure(s): 15-JUL-2001 2-12-01
Mileage at Failure(s): 39,307 29,984
Vehicle Speed at Failure(s): 0 0

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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

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

BRAKE LIGHTS WILL NOT LIGHT UP. POLICE HAS PULLED VEHICLE OVER FOR BRAKE LIGHTS NOT BEING ON. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

2/ /01 Pulled over by Stanford Police / was not cited
2/12/01 Dropped car off because of no stoplights.
2/13/01 Picked up car.
7/17/01 Dropped car off because of no stoplights.
7/24/01 Picked up car.

CONTINUE ON BACK IF NEEDED

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

(Page 1 through Page 7)