



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 117

Date Received

24-JUL-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

893146

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 and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3GN6C26J4XG217663		CHEVROLET TRUCK	SUBURBAN	1998	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☒ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ 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 03270000	Part Name(s) BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 11-JUL-2001 25000 Mileage at Failure(s)	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE IN TRAFFIC HAD STARTED TO APPLY BRAKES, AND BRAKES STARTED TO MAKE LOUD NOISES, SQUEALING AND GRINDING. WAS ABLE TO STOP VEHICLE. HAD CONTACTED DEALERSHIP, WHO COULD NOT LOOK AT VEHICLE. TOOK TO LOCAL SERVICE STATION, AND MECHANIC INDICATED PROBLEM WAS BRAKE PADS WHICH WERE WORN OUT AND ROTORS WHICH WERE SHOT. OTHER SET OF ROTORS NEEDED TO BE GROUNDED DOWN.*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.

 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 117 Date Received: <u>24-JUL-2001</u> Od_or _____ rt_dt _____ od_rt _____ up_ltr _____ Reference No. <u>893146</u> Work Number _____ Home No. _____	
OWNER INFORMATION (Type or Print) _____ 703986				Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorized representative, this is the vehicle manufacturer. _____ Signature of Owner _____ Date <u>8/1/01</u>	
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>3GNCG26J4XG217663</u>		Vehicle Make <u>CHEVROLET TRU</u>		Vehicle Model <u>SUBURBAN</u>	
Vehicle Year <u>1999</u>		Current Odometer Reading <u>25,251</u>			
Purchase Date <u>June 1999</u>		Dealer's Name <u>Pough Keepie Chevy</u>		Engine Size (CID/CC/L) _____	
☒ New ☐ Used		City <u>Pough Keepie NY</u> Zip Code _____		No Cylinders _____	
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 <u>03270000</u>		Part Name(s) <u>BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM</u>		Location ☒ Left ☐ Right ☒ Front ☐ Rear	
Failed Part(s) ☒ Original ☐ Replacement		No of Failures _____			
Date(s) of Failure(s) <u>11-JUL-2001</u>		Mileage at Failure(s) <u>25000</u>		Vehicle Speed at Failure(s) <u>50-55</u>	
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	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
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CONTINUE ON BACK IF NEEDED

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