



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 120

Date Received

03-AUG-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

893417

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 or driver's side)		Vehicle Make GMC	Vehicle Model SAFARI	Vehicle Year 1990	Current Odometer Reading
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 Bel ☐ 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 01530000	Part Name(s) STEERING:LINKAGES:ARM:IDLER AND ATTACHMENT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 0	Date(s) of Failure(s) 22-JUL-2001 Mileage at Failure(s) 10400	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 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER WAS DRIVING ALONG AND MADE A STOP; THEN, PUT VEHICLE IN REVERSE AND IT MADE A LOUD NOISE, LATER SHE WAS TOLD THAT IDLE ARM HAD FALLEN OFF.*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
Vehicle Owner's Questionnaire (VOQ)
NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

706480

Reference No.
893417

FOR AGENCY USE ONLY 120

Date Received

03-AUG-2001

OFFICE OF INVESTIGATION

01 SEP 11 2001

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Work No.

Home No.

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

YES ☒ NO ☐

Name and address to the vehicle manufacturer.

Date 8/29/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1GKDM1623LB502209

Vehicle Make GMC

Vehicle Model SAFARI

Vehicle Year 1990

Current Odometer Reading 13499

Engine Size (CID/CC/L) No cylinders

Fuel Injection Turbo Diesel Gas

Body Style 2-Door

Vehicle Type Car

Drive Train Front

Transmission Type Automatic

Antilock Brakes Yes

Restraint System 3-Point Belt

Cruise Control No

Location Front

Failed Part(s) Original

Failed Part(s) Replacement

Failed Part(s) Available?

Failed Part(s) NHTSA Previously Contacted?

No of Failures 0

Date(s) of Failure(s) 22-JUL-2001

Mileage at Failure(s) 13300

Vehicle Speed at Failure(s) 0

Crash Yes ☒ No ☐

File Yes ☒ No ☐

Number of Persons Injured 0

Number of Fatalities 0

Estimated Property Damage 0

Reported to Police Yes ☒ No ☐

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

CONSUMER WAS DRIVING ALONG AND MADE A STOP, THEN, PUT VEHICLE IN REVERSE AND IT MADE A LOUD NOISE, LATER SHE WAS TOLD THAT IDLE ARM HAD FALLEN OFF. *AK

My Van is still in the shop, I have had problems with it.

Vibrating at 65 mph, also steering column was loose +

needed to be tightened. This should not have happened to an 11 year old VAN. (bad design engineering)

CONTINUE ON BACK IF NEEDED

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