



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

07-SEP-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

895977

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 door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
NOT AVAILABLE	CHEVROLET TRUCK	VENTURE	2000	

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 ☐ 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 07301000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:INTERLOCK SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 07-JUN-2001 Mileage at Failure(s) 20000	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)

VEHICLE JUMPED OUT OF PARK INTO NUETRAL WHILE IGNITION WAS OFF, AND ROLLED BACKARDS DOWN A HILL 150 FEET. VEHICLE HAS BEEN AT GMC DEALER FOR A MONTH, AND PROBLEM STILL HAS NOT BEEN RESOLVED. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

COPIES OF REPORTS - FREE -

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 335

Date Received

11 SEP 2001
07-SEP-2001
OFFICE
DEFECT INVESTIGATION

Od_or
rt_dt
ed_rt
up_itr

Reference No.

895977

OWNER INFORMATION (Type or Print)

713571

Work Number

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) (Located at bottom of windshield on most cars)

NOT AVAILABLE

Vehicle Make

CHEVROLET TRU

Vehicle Model

VENTURE

Vehicle Year

2000

Current Odometer Reading

20,100

Purchase Date

12/99

Dealer's Name

Cargill Chevrolet

Engine Size (CID/CC/L)

No Cylinders

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

☒ New ☒ Used

City

Putnam

State

CT

Zip Code

Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual

☒ Automatic

☒ Yes

☒ No

☐ 3-Point Belt

☒ Driver's side Airbag

☒ Passenger's side Airbag

☐ Motorbelt

☐ 2-Point Belt

☒ Yes

☒ No

☒ Front

☒ Rear

☒ 4-Wheel

☐ Car

☒ Van

☐ Minivan

☐ Other

☐ Sport Utility

☐ Truck

☐ Motorcycle

☐ 2-Door

☐ 4-Door

☐ Station wagon

☐ Pick Up

☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
07301000

Part Name(s)

POWER TRAIN: TRANSMISSION: AUTOMATIC: INTERLOCK SYSTEM

Location

☐ Left

☐ Front

☐ Right

☐ Rear

Failed Part(s)

☐ Original

☐ Replacement

No of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

07-JUN-2001

20000

Park

July 21 - 2001
Park

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

Fire

Number of Persons Injured

Number of Fatalities

Estimated Property Damage

Reported to Police

☐ Yes

☒ No

☐ Yes

☒ No

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☒ Yes

☒ No

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

VEHICLE JUMPED OUT OF PARK INTO NEUTRAL WHILE IGNITION WAS OFF, AND ROLLED BACKWARDS DOWN A HILL 150 FEET. VEHICLE HAS BEEN AT GMC DEALER FOR A MONTH, AND PROBLEM STILL HAS NOT BEEN RESOLVED. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

Vehicle was parked - Keys in ignition, not running.
5 year son, ~~was~~ left arm hit shift out of Park into
Neutral. Vehicle rolled, hit tree. Damage to (R)
Rear of vehicle. 508-987-2915

CONTINUE ON BACK IF NEEDED

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