



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 1039

Date Received

14-SEP-2001

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Reference No.

896340

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 door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1GNDM19WXYB146092	CHEVROLET TRUCK	ASTRO	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 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 08320000	Part Name(s) ELECTRICAL SYSTEM:WIRING:HARNES:UNDER DASH	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 13-SEP-2001 14 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 VEHICLE WAS PARKED IT CAUGHT ON FIRE FROM THE ELECTRICAL WIRING HARNESS. ALSO, FIREMEN STATED THAT FIRE CAME FROM WIRES WHERE FUSES WERE LOCATED. CONTACTED DEALER. VEHICLE AT DEALERSHIP.*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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NAT-ONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1039 Date Received 14-SEP-2001 OFFICE DEFECTS INV. SECTION Reference No. 896340	
OWNER INFORMATION (Type or Print) 715175		Work Number Home Number 	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of _____ and address to the vehicle manufacturer. Signature of Owner		YES ☒ NO ☐ Date <u>10/01/01</u>	
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1GNDM19WXYB146092		Vehicle Make CHEVROLET TRU	
Vehicle Model ASTRO		Vehicle Year 2000	
Purchase Date <u>Dec. 1999</u>		Current Odometer Reading <u>14,476</u>	
Dealer's Name <u>Ed Morse Sawgrass</u>		Engine Size (CID/CCIL) ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used		No Cylinders _____	
City <u>Surprise</u> State <u>FL</u> Zip Code <u>33323</u>			
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 ☐ 2-Door ☐ Van ☐ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 08320000		Part Name(s) ELECTRICAL SYSTEM WIRING HARNESS UNDER DASH	
Location ☐ Left ☐ Right ☐ Front ☐ Rear		Failed Part(s) ☒ Original ☐ Replacement	
No of Failures _____		Date(s) of Failure(s) <u>13-SEP-2001</u> Mileage at Failure(s) <u>14,476</u> Vehicle Speed 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 Damage _____		Reported to Police ☒ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE VEHICLE WAS PARKED IT CAUGHT ON FIRE FROM THE ELECTRICAL WIRING HARNESS. ALSO, FIREMEN STATED THAT FIRE CAME FROM WIRES WHERE FUSES WERE LOCATED. CONTACTED DEALER. VEHICLE AT DEALERSHIP.*AK			
CONTINUE ON BACK IF NEEDED			
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PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(5)**

(Page 1 through Page 5)









