



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

07-DEC-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

899976

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) <small>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1GNDX13E01D184044	CHEVROLET TRUCK	VENTURE	2001			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03250000 06400000	Part Name(s) BRAKES:HYDRAULIC ANTI-SKID SYSTEM FUEL:THROTTLE LINKAGES AND CONTROL	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) 23-AUG-2001 Mileage at Failure(s) 15 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN BACKING OUT VEHICLE WILL JUMP AND THEN ACCELERATE . BRAKES WILL NOT STOP VEHICLE. SOMETIMES VEHICLE WOULD JUMP AND STOP. ALSO, VEHICLE IS DOING THE SAME THING WHEN PUT IT TO DRIVE. WHEN STOPPING AND TAPPING GAS PEDAL LIGHTLY VEHICLE WOULD ACCELERATE FORWARD. CONTACTED DEALER, AND DEALER STATED NOTHING WAS WRONG WITH VEHICLE.*AK

CONTINUED ON REVERSE

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.

<p style="text-align: center;">DOT Auto Safety Hotline</p> <p style="text-align: center;">Vehicle Owner's Questionnaire (VOQ)</p> <p style="text-align: center;">NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>	<p style="text-align: center;">FOR AGENCY USE ONLY 1039</p> <p>Date Received: <u>07-DEC-2001</u></p> <p>Reference No.: <u>899976</u></p>
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OWNER INFORMATION (Type or Print)

Work: _____
Home: _____

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

YES NO

Signature of Owner: _____ Date: 11/2/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN): <u>1GNDX13E01D184044</u>	Vehicle Make: <u>CHEVROLET TRU</u>	Vehicle Model: <u>VENTURE</u>	Vehicle Year: <u>2001</u>	Current Odometer Reading: <u>15,987</u>	
Purchase Date: _____	Dealer Name: <u>Pirelli Enterprises</u>	City: <u>Lakewood</u> State: <u>WI</u> Zip Code: <u>08901</u>	Engine Size (CID/CC): _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injected	
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used	Transmission Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System: <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input checked="" type="checkbox"/> Drivers Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengers Airbag	Cruise Control: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train: <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type: <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport/Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other		Body Style: <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input checked="" type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: <u>03250000</u> <u>06400000</u>	Part Name(s): <u>BRAKES:HYDRAULIC:ANTI-SKID SYSTEM</u> <u>FUEL:THROTTLE LINKAGES AND CONTROL</u>	Location: <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s): <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures: <u>5</u>	Date(s) of Failure(s): <u>23-AUG-2001</u> <u>6-11-01</u> Mileage at Failure(s): <u>15</u> Vehicle Speed at Failure(s): <u>From a Stop</u> <u>12-14-01 + 12-19-01</u>	Failed Part(s): <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously: <input type="checkbox"/> Yes <input type="checkbox"/> 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: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured: <u>1</u>	Number of Fatalities: <u>0</u>	Estimated Property Damage: _____	Reported to Police: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN BACKING OUT VEHICLE WILL JUMP AND THEN ACCELERATE. BRAKES WILL NOT STOP VEHICLE. SOMETIMES VEHICLE WOULD JUMP AND STOP. ALSO, VEHICLE IS DOING THE SAME THING WHEN PUT INTO DRIVE. WHEN STOPPING AND TAPPING GAS PEDAL LIGHTLY VEHICLE WOULD ACCELERATE FORWARD. CONTACTED DEALER, AND DEALER STATED NOTHING WAS WRONG WITH VEHICLE. *When gas is tapped lightly, the vehicle is hesitating + then uncontrollably accelerates + gets thrown across lanes of traffic when trying to drive out of side roads onto highways. We are petrified that we are going to die in this vehicle. we've had 2 near misses because of it.*

The Privacy Act of 1974 (Public Law 93-502) 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.



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

U.S. Department
of Transportation
National Highway
Traffic Safety
Administration
400 Seventh St., S.W.
Washington, D.C. 20590
Official Business
Penalty for Private Use \$300

*This all began in June of 2001 - the vehicle when in forward
would bump & jump as though we ran over a lid on a bike.
The vehicle would hesitate when accelerate in Reverse. The
Problem began in Drive in October 2001. One of the bluest incidents
occurred on 12-6-01 I was pulling out of a parking lot at 2:15 pm (after
the dealer got back hours) I was inching my way out of the parking lot
into 4 lanes of traffic. The last time I barely touched the gas, the
vehicle after hesitating - accelerated to high unacceptable speed & landed
across 2 lanes of concrete divider, causing a dump truck to look up its
brakes & come speeding & backing directly toward me & at the last
minute spinning around & hitting a tree instead of my vehicle. This occurred
after a dealer dealer claimed it wasn't happening because "The computer
said" On 12-7-01 (See Service Bulletin under the heading "Record") They
Replaced said "SHIFT sensor" & changed us for an Alignment. The problem
has loosened since then. On 12-13-01 the vehicle hesitated & then proceeded
unintentionally - while in the middle of a turn & caused the vehicle to turn &
curve & almost struck a person standing there. On 12-26-01 my husband
got their address that lands on highway traffic while turning due
development to get on the highway. (continued)*

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON THE FAILURE(S) (IF APPLICABLE)

THE IDENTIFICATION NO.	0	0	1						
MANUFACTURER/THE NAME									
SIZE									

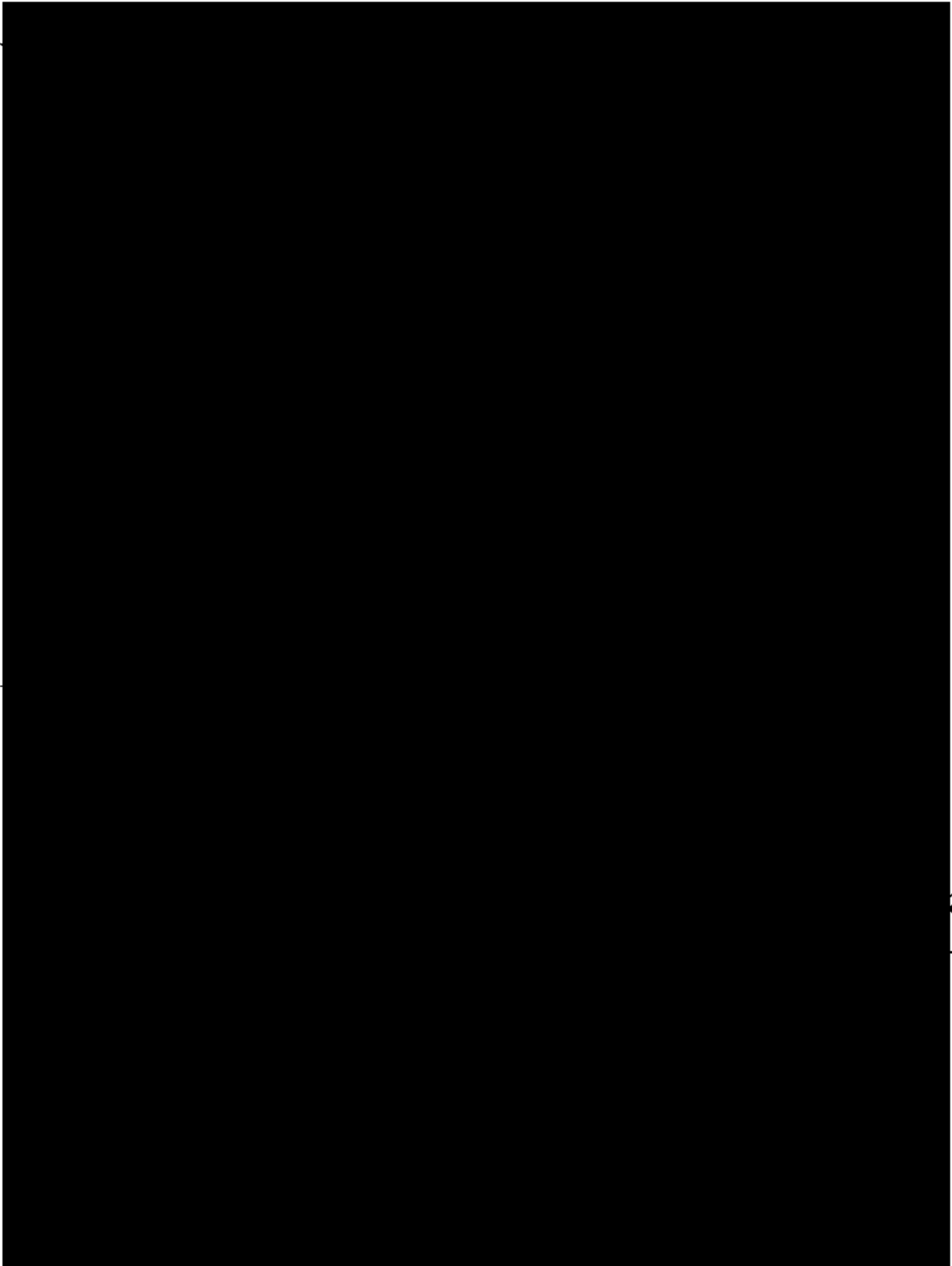
* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

As did another innocent driver & a pedestrian on a crosser.

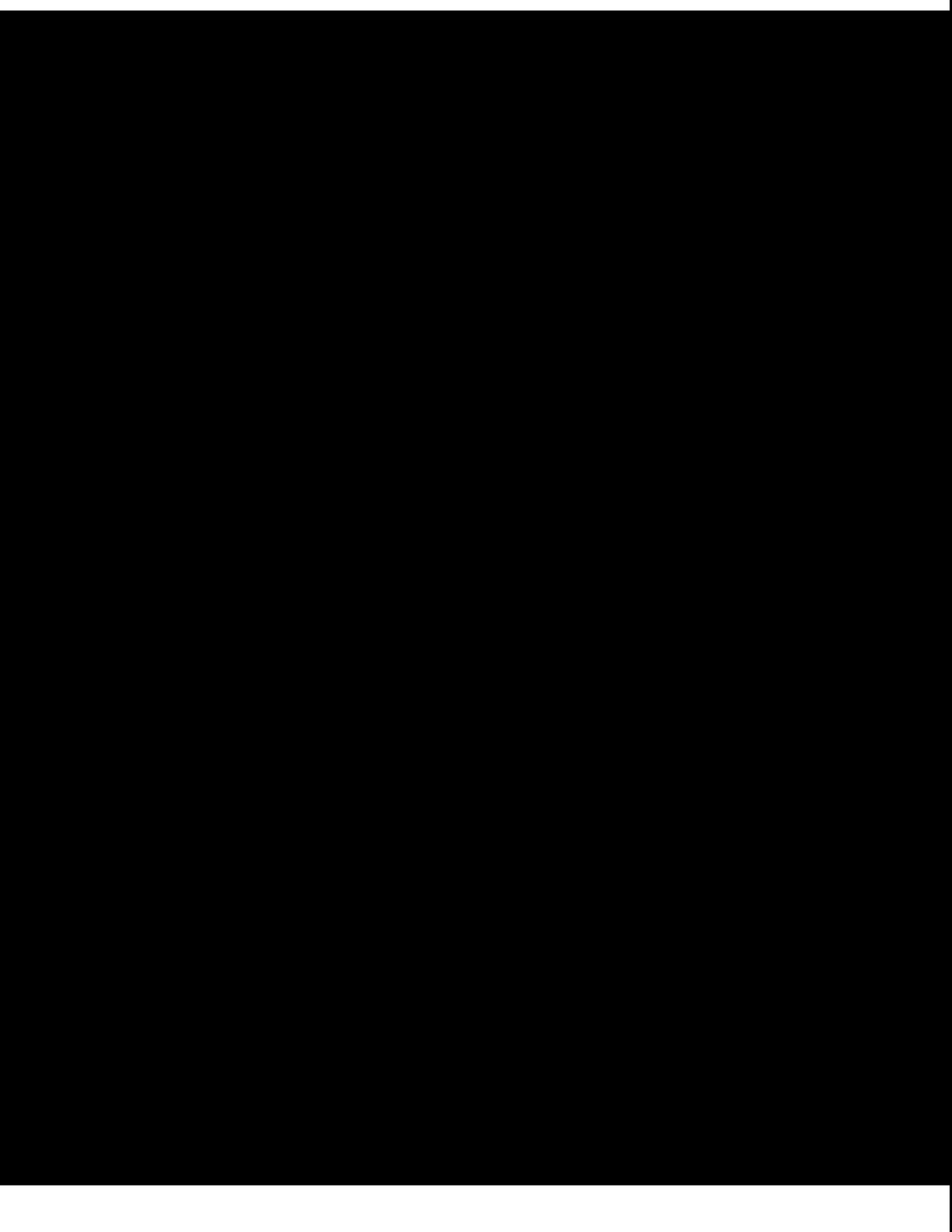
THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)

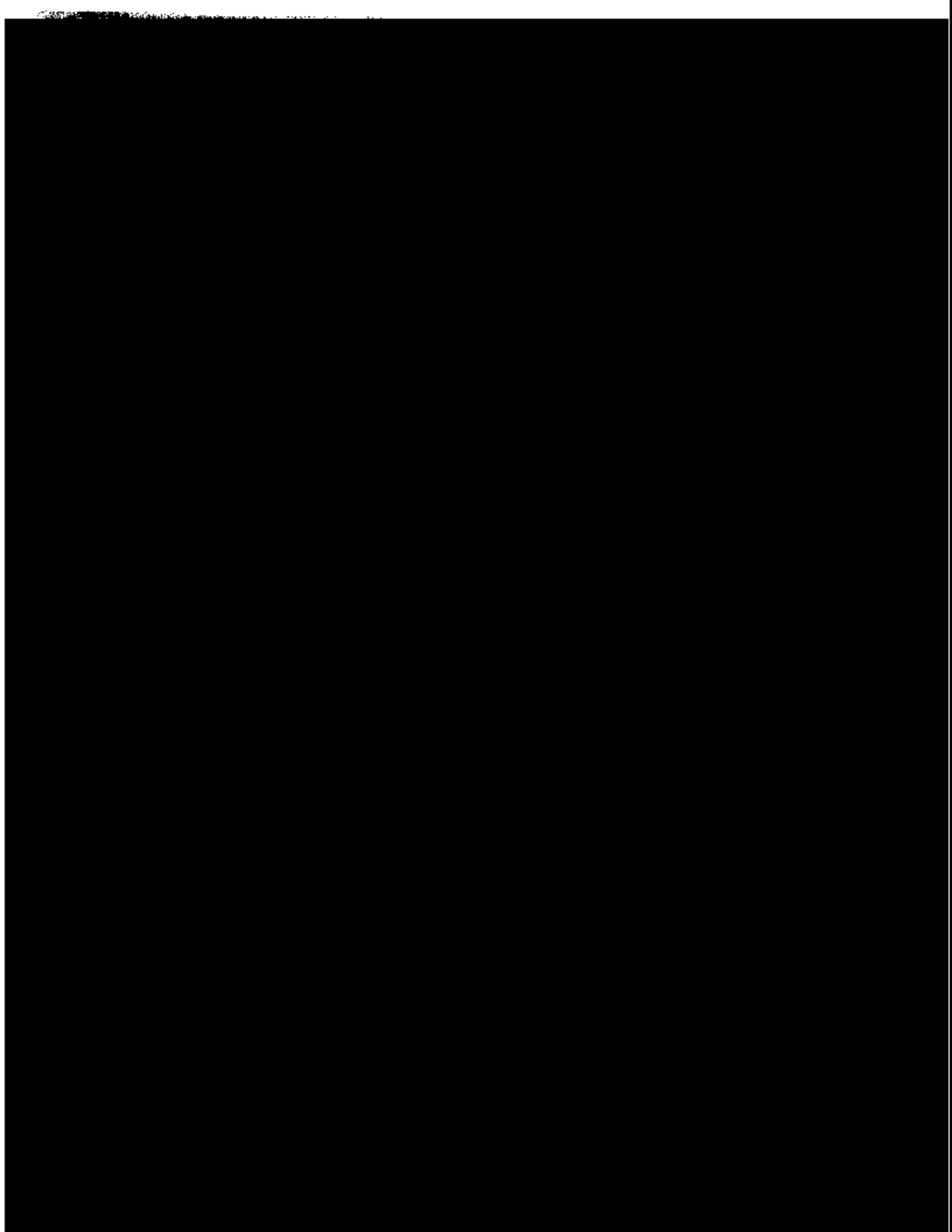
(Page 1 through Page 29)



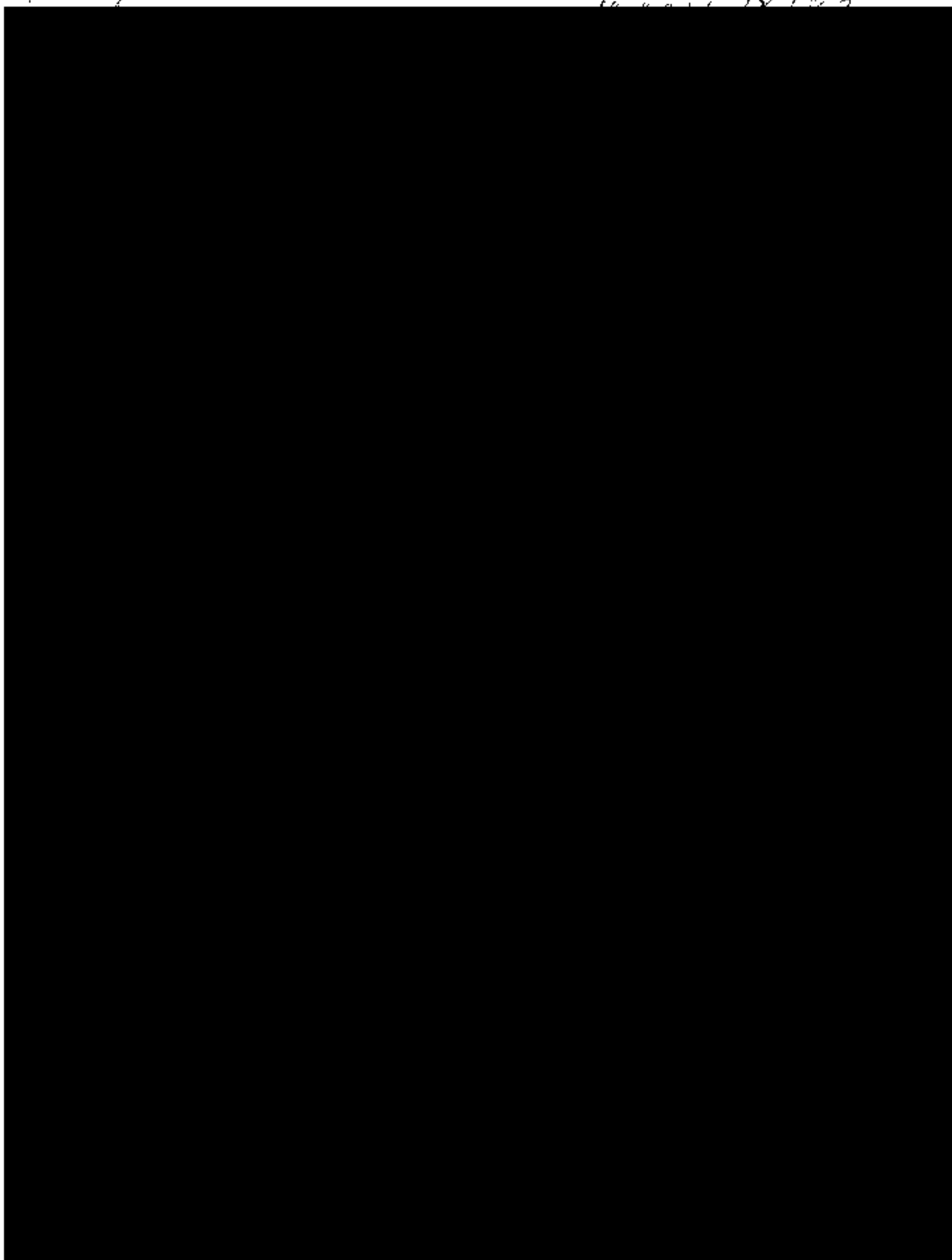
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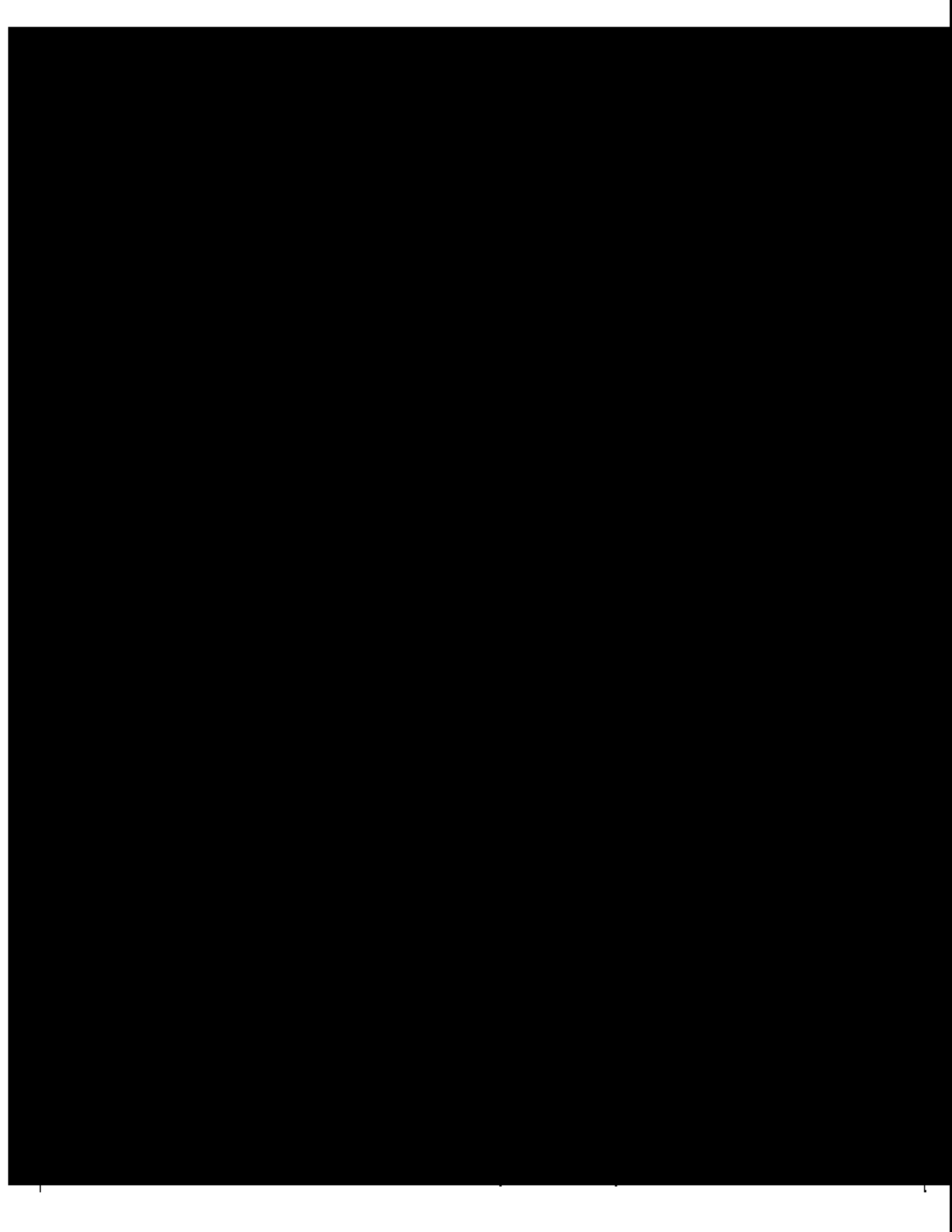


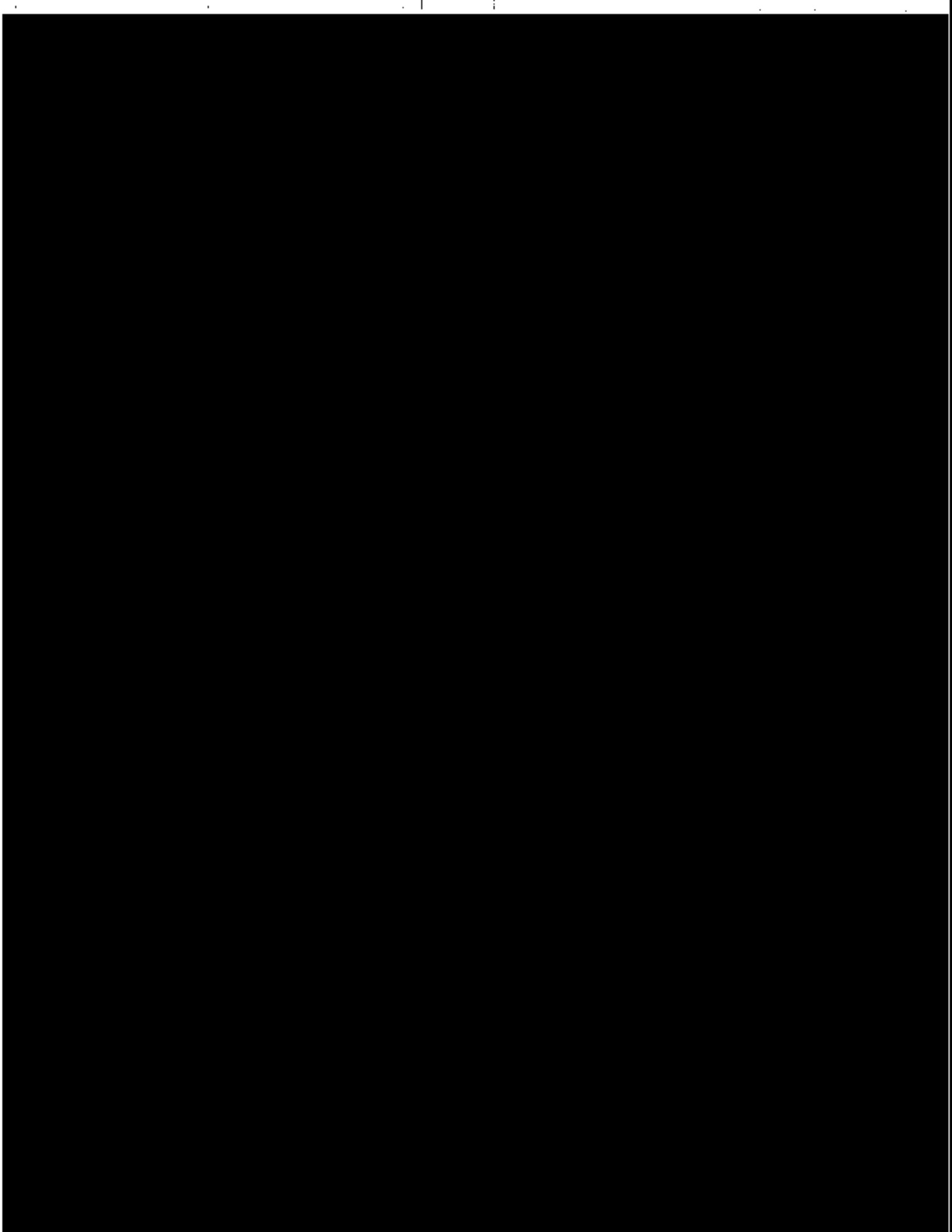
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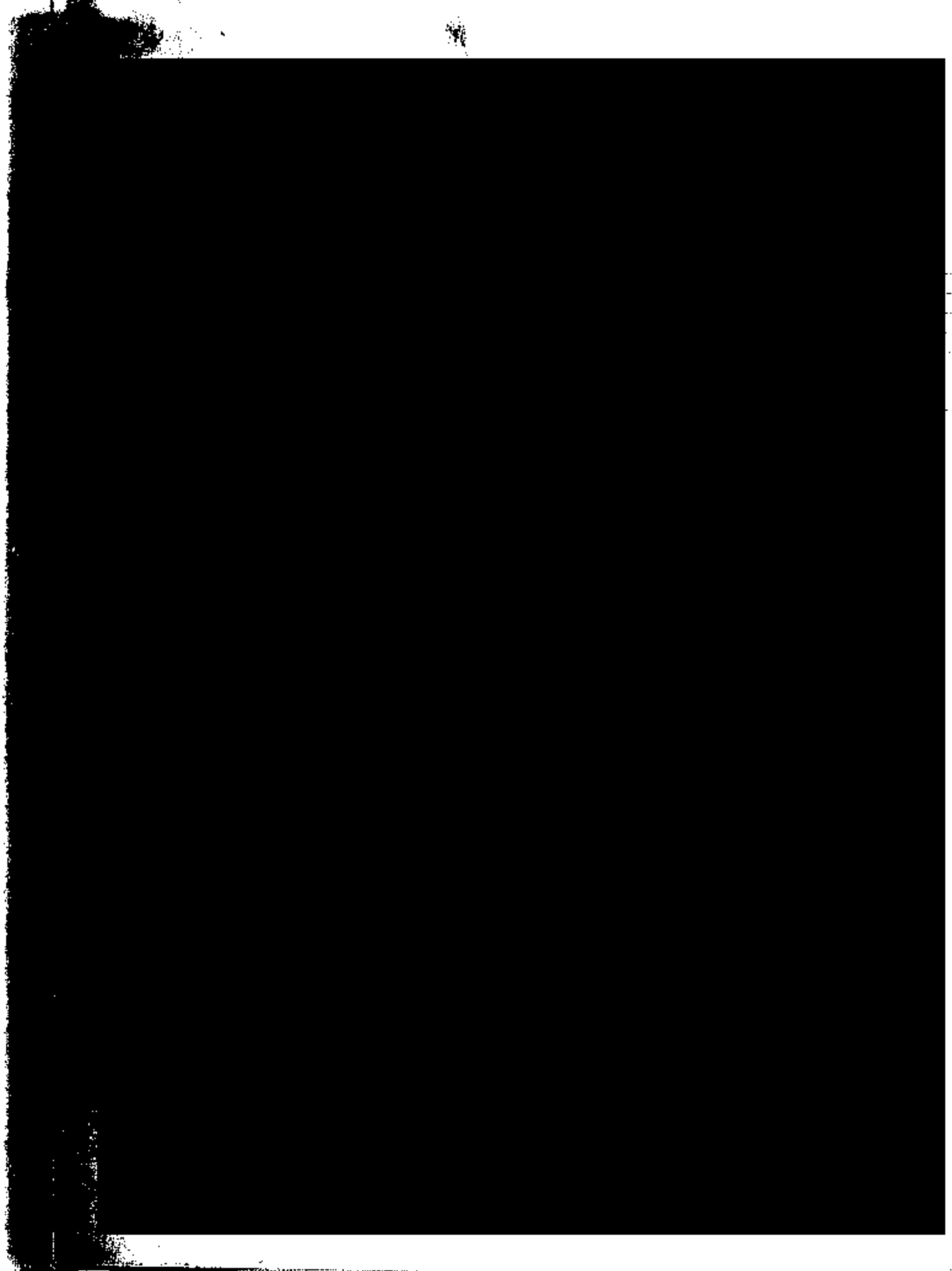




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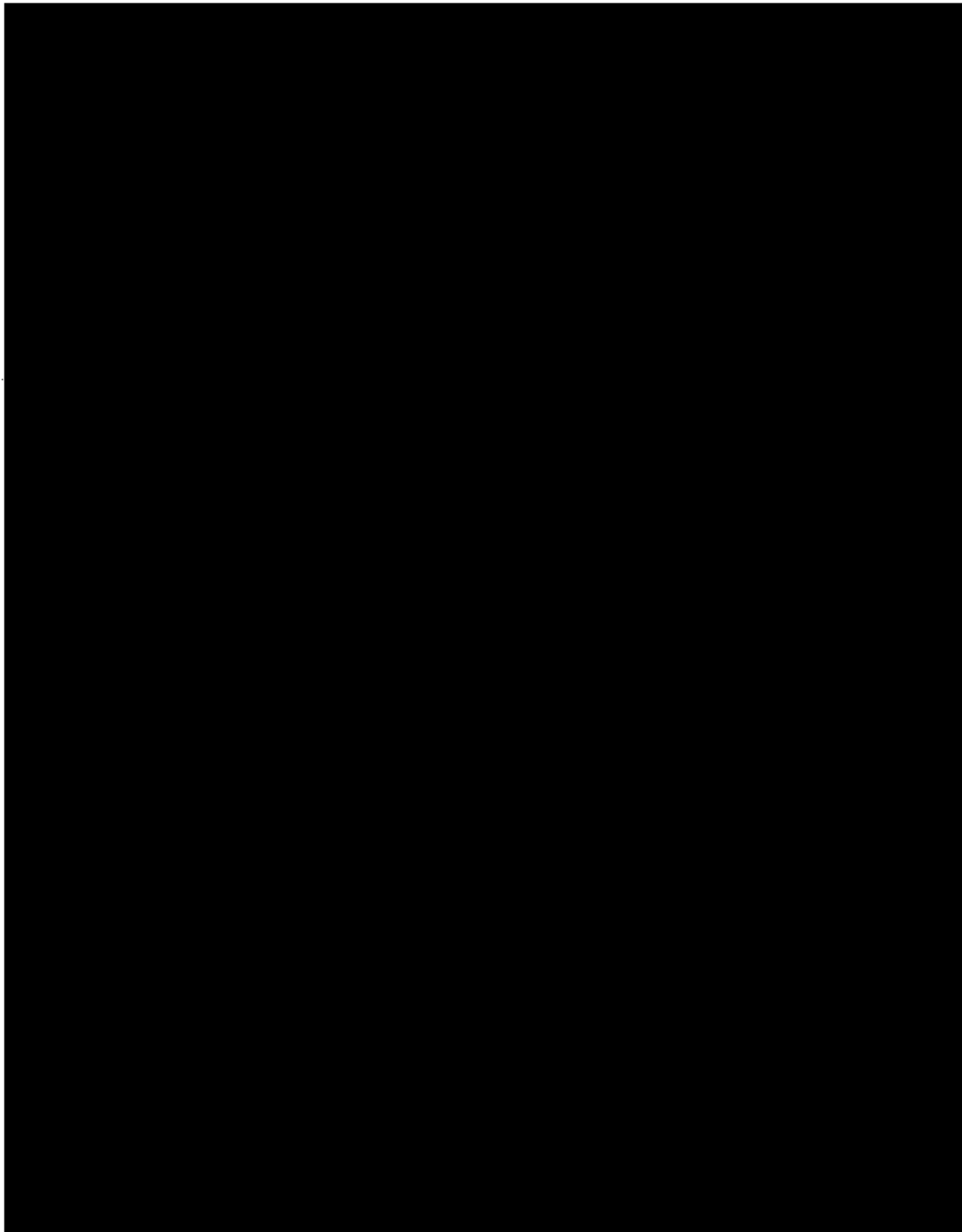


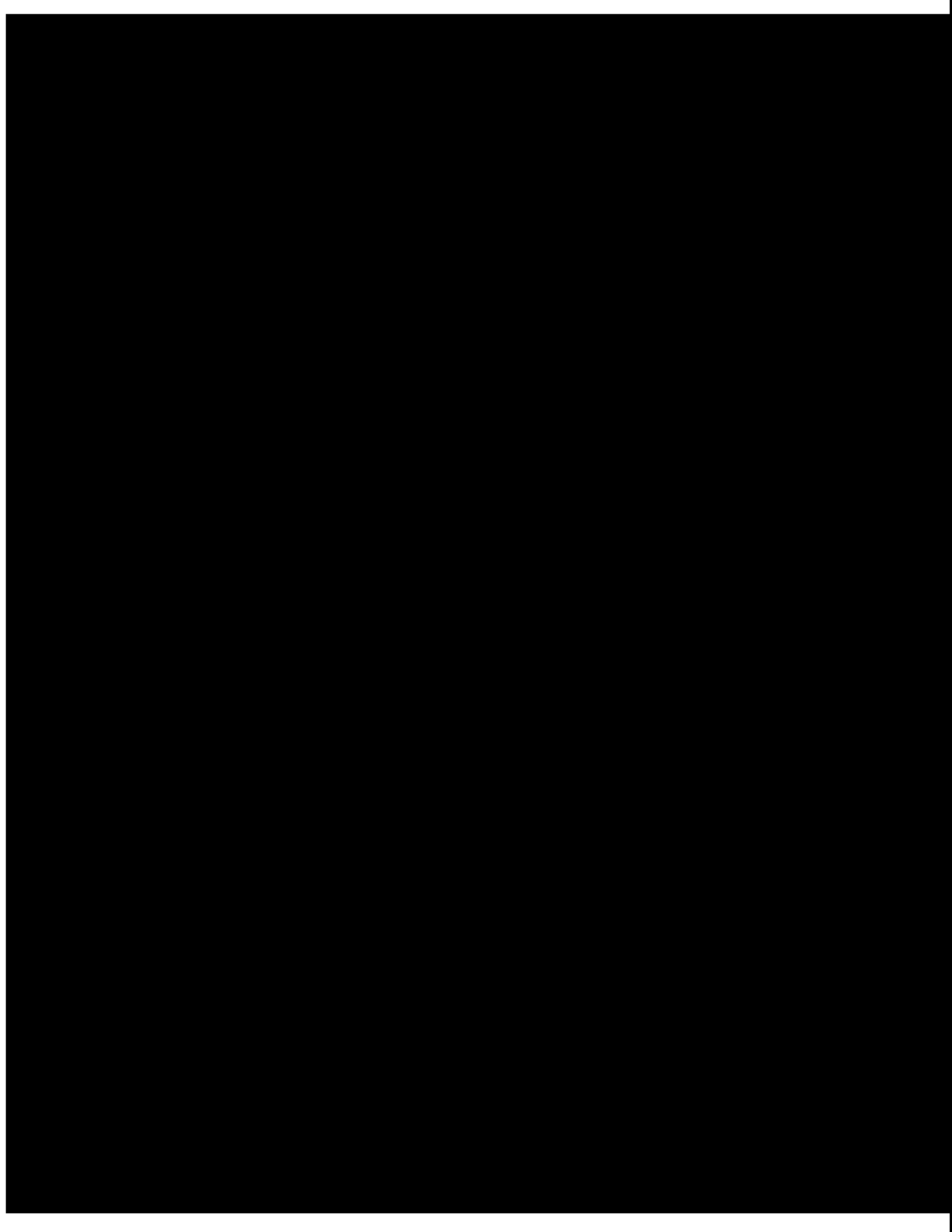


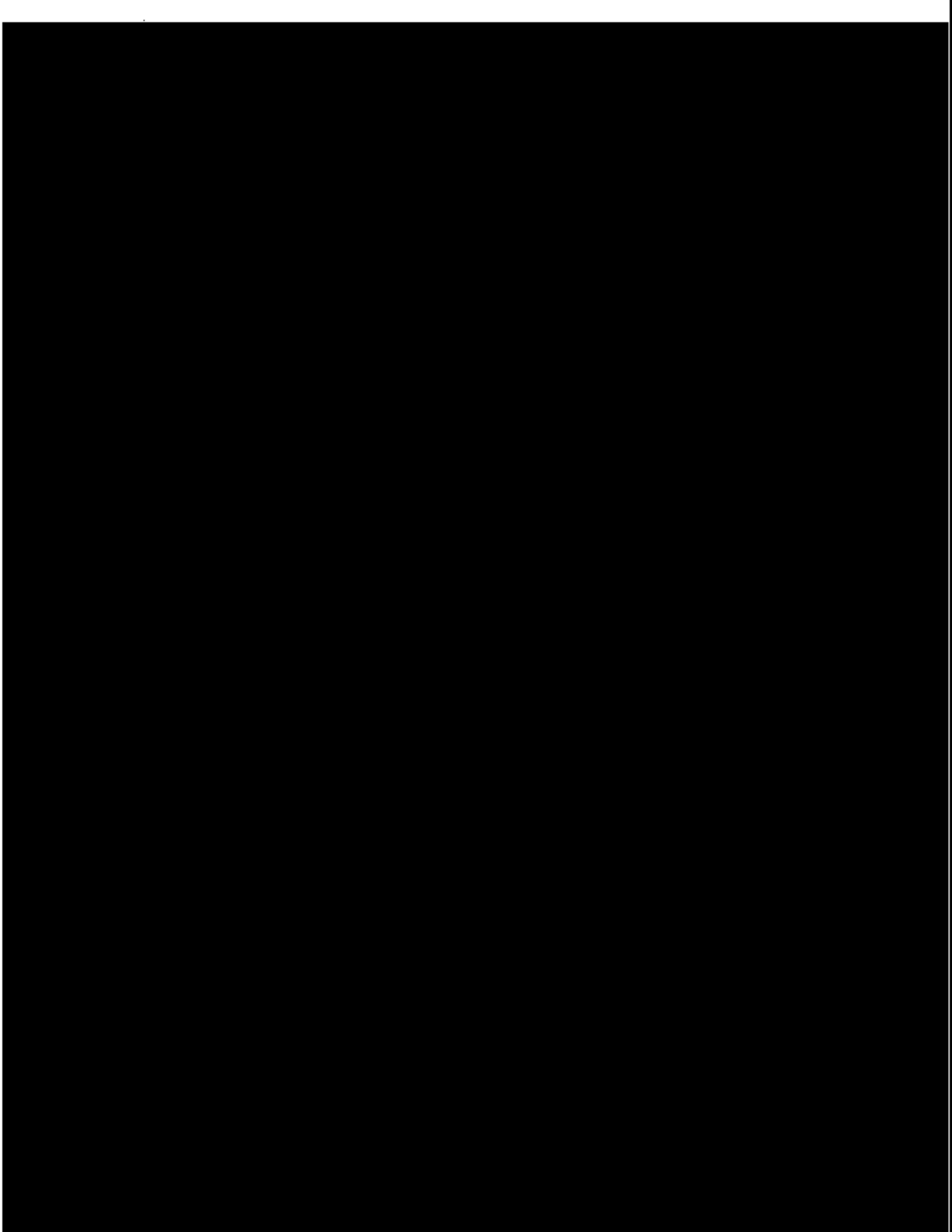


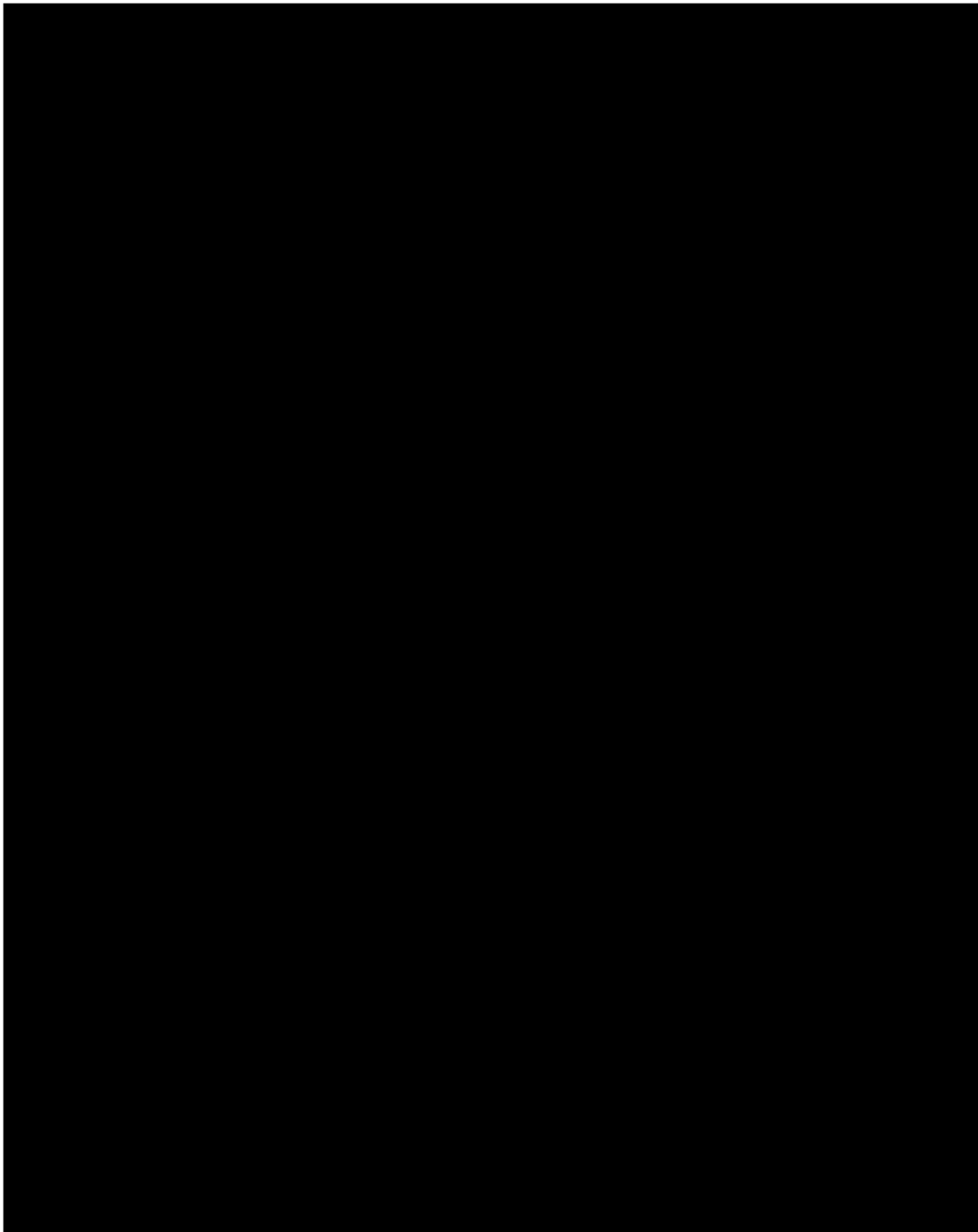


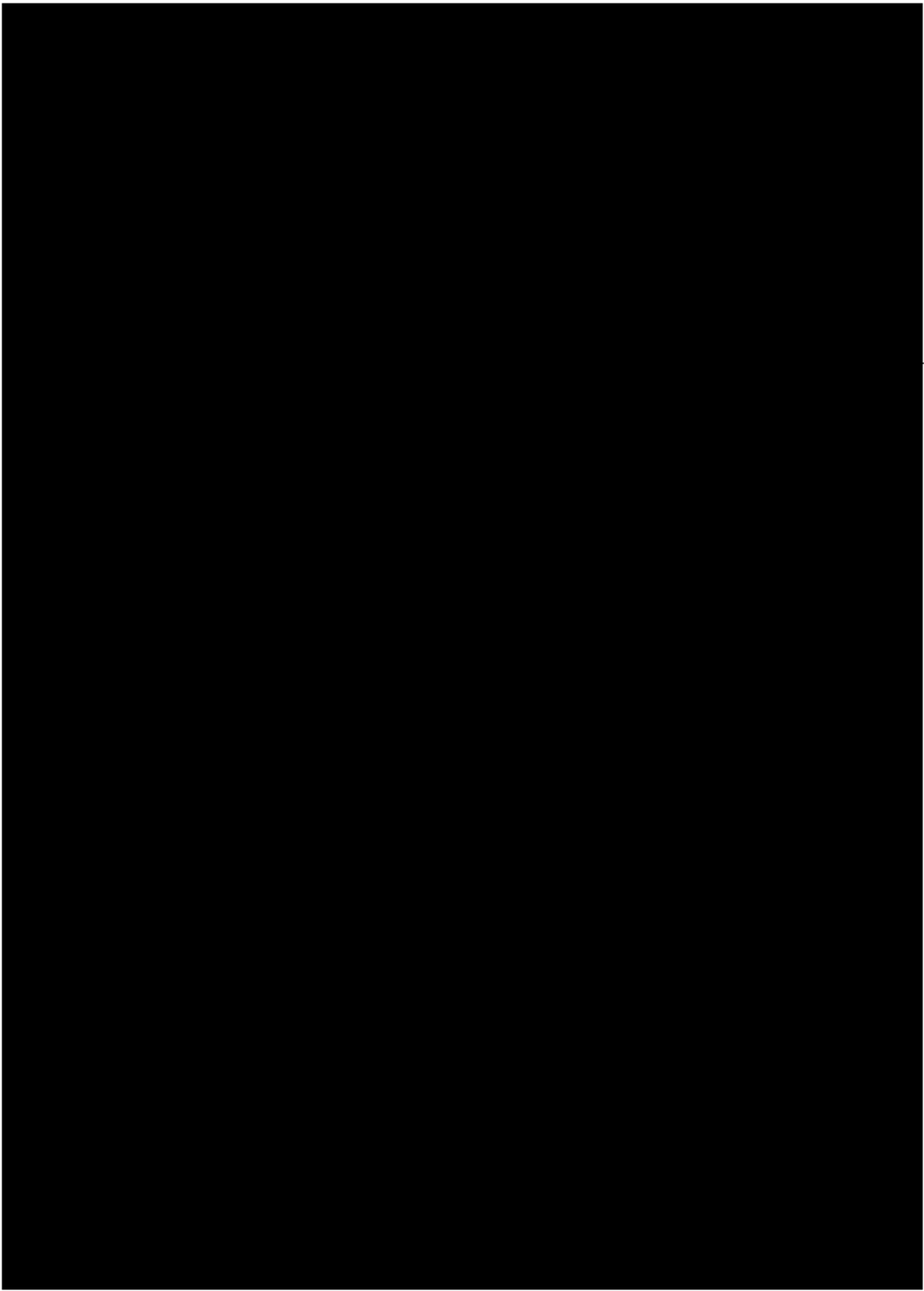


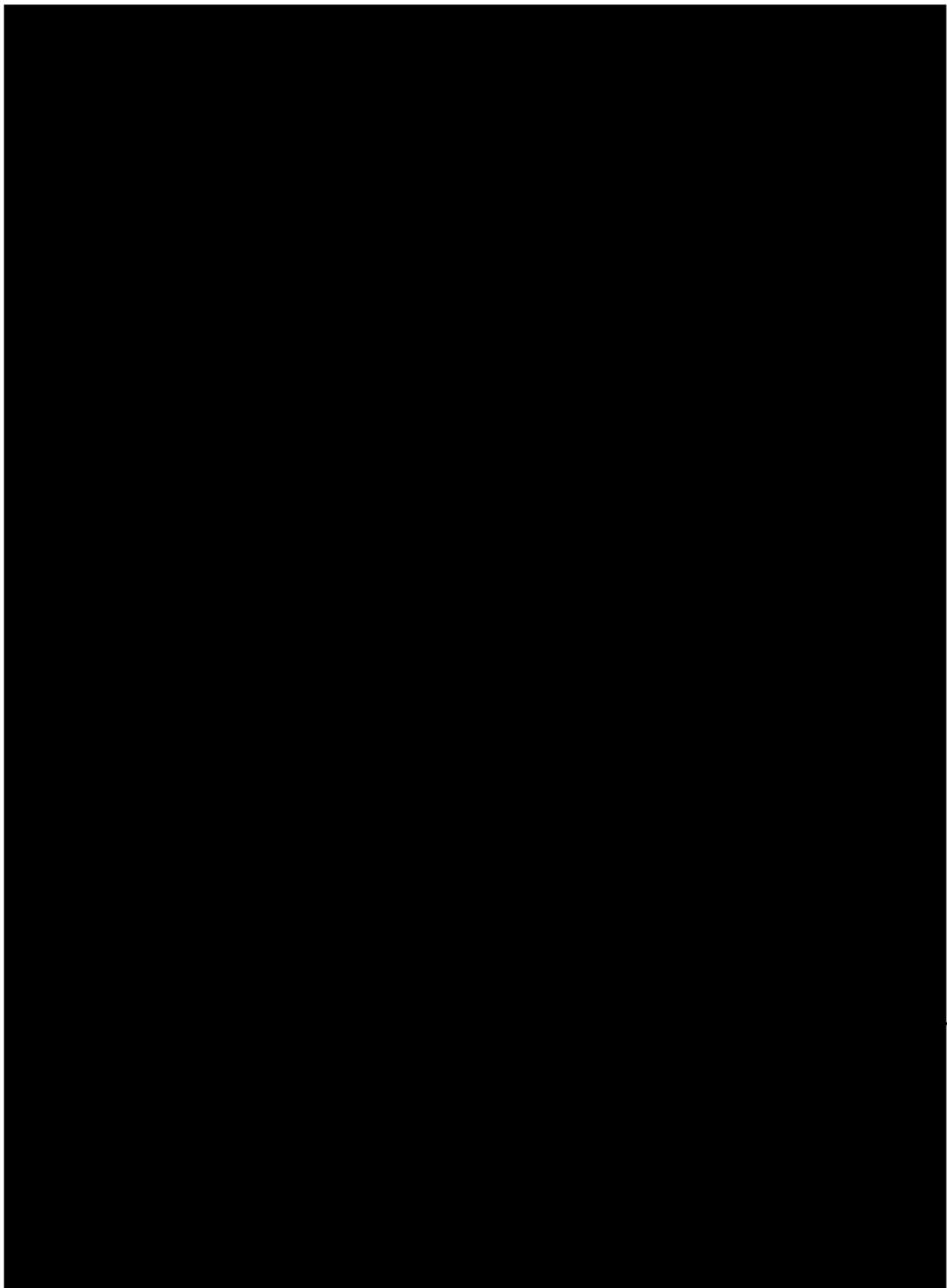


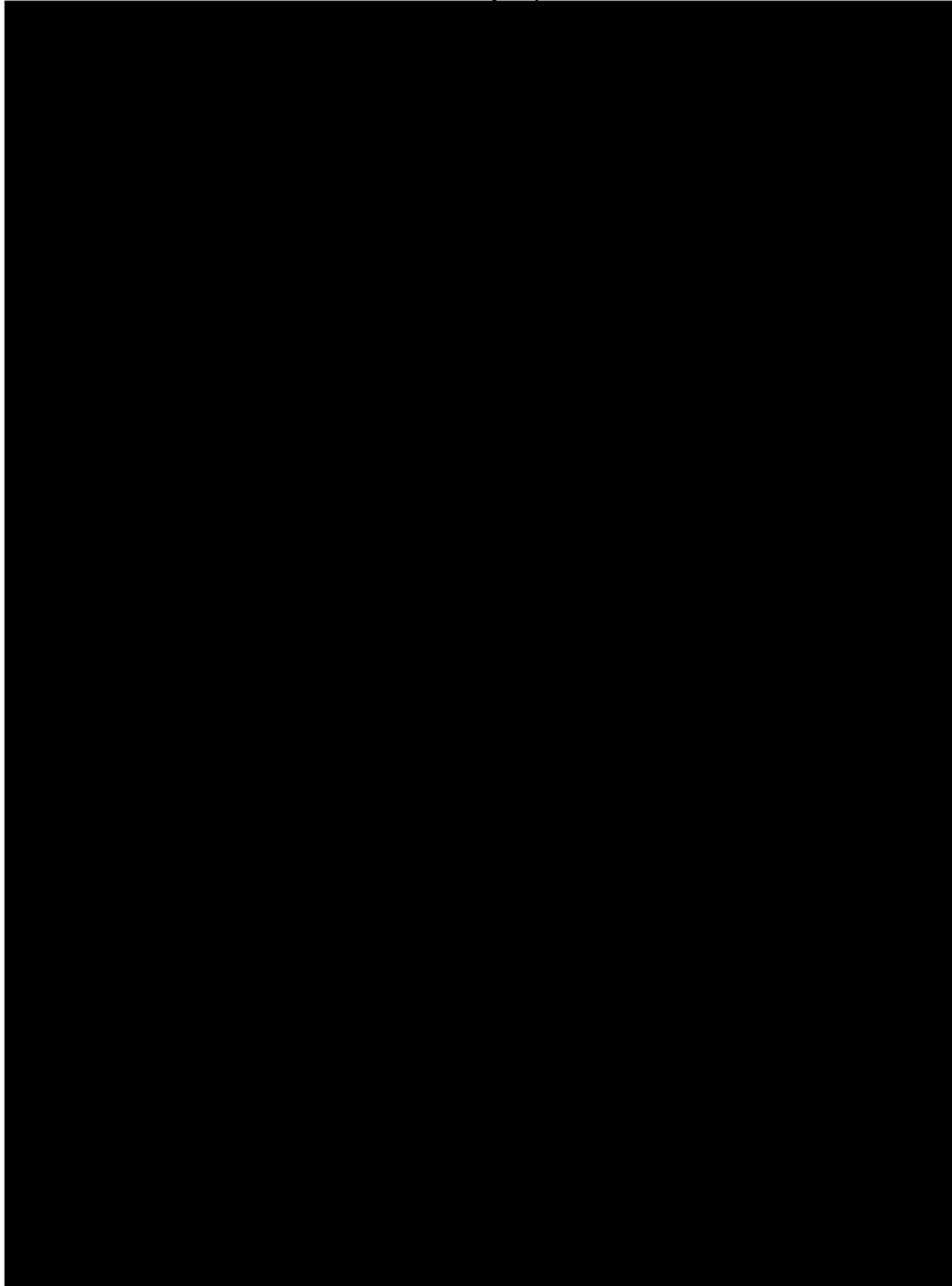












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