



U.S. Department of Transportation  
National Highway Traffic Safety Administration

Auto Safety Hotline

# Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.

CORRECT MARK: ●

## FOR AGENCY USE ONLY

Date Received	04-yr	_____
19-MAY-00	11 dt	_____
Reference No.	cd: r	_____
	sp: r	_____

### OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

### VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at base of windshield on driver's side)		VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
1GNDT13WIT2301300		Chevrolet	Blazer	08/1996	1996
VEHICLE MANUFACTURER					
<input type="checkbox"/> BMW <input type="checkbox"/> Ford <input type="checkbox"/> Honda <input type="checkbox"/> Nissan <input type="checkbox"/> Subaru <input type="checkbox"/> Volvo <input type="checkbox"/> Other <input type="checkbox"/> Daimler/Chrysler <input checked="" type="checkbox"/> General Motors <input type="checkbox"/> Hyundai <input type="checkbox"/> Saab <input type="checkbox"/> Toyota <input type="checkbox"/> VW					
PURCHASE DATE	<input checked="" type="radio"/> New <input type="radio"/> Used	DEALER'S NAME	CITY	STATE	ZIP CODE
9/25/96		Bob Grimm Chevrolet	Morton	IL	61550
ENGINE SIZE	FUEL SYSTEM	FUEL TYPE	TRANSMISSION TYPE	ANTILOCK BRAKES	RESTRAINT SYSTEM
4.3	<input type="checkbox"/> Turbo <input checked="" type="checkbox"/> Fuel Injection	<input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas	<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Driver's Side Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Motorist <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> No
NO. CYLINDERS	DRIVETRAIN	VEHICLE TYPE		DOORS	BODY STYLE
6	<input type="checkbox"/> Front <input checked="" type="checkbox"/> 4-Wheel <input type="checkbox"/> Rear	<input type="checkbox"/> Car <input type="checkbox"/> Minivan <input type="checkbox"/> Truck <input type="checkbox"/> Other <input type="checkbox"/> Van <input checked="" type="checkbox"/> Sport Utility <input type="checkbox"/> Motorcycle		<input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door	<input type="checkbox"/> Hatchback <input type="checkbox"/> Sedan <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Station Wagon

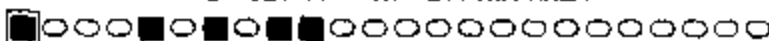
### FAILED COMPONENT(S)/PART(S) INFORMATION

<b>COMPONENT</b> <input type="checkbox"/> Child Seat <input type="checkbox"/> Electrical Lights & Alarms <input type="checkbox"/> Engine & Cooling System <input type="checkbox"/> Equipment <input type="checkbox"/> Fuel System, Exhaust <input type="checkbox"/> Heater, Defrost, Ventilator <input type="checkbox"/> Interior <input type="checkbox"/> Parking Brake <input type="checkbox"/> Power Train <input type="checkbox"/> Service Brakes <input type="checkbox"/> Steering <input type="checkbox"/> Structure <input type="checkbox"/> Suspension <input checked="" type="checkbox"/> Visual Systems <input type="checkbox"/> Other	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	8	TIRE NAME	COMPLETE TIRE SIZE
	INCIDENT DATE Latest Incident Was May 4, 2000	TIRE BRAND	
	MILEAGE AT INCIDENT 1st Incident was around 40,000. Latest was at 86,000.	<input type="checkbox"/> BF Goodrich <input type="checkbox"/> Cooper <input type="checkbox"/> Firestone <input type="checkbox"/> Goodyear <input type="checkbox"/> Kelly Springfield <input type="checkbox"/> Michelin <input type="checkbox"/> Yokohama <input type="checkbox"/> Other	
VEHICLE SPEED AT INCIDENT UNKNOWN	FAILED PART(S)	FAILED PART(S) AVAILABLE?	NHTSA PREVIOUSLY CONTACTED?
	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
HANDICAPPED ADAPTIVE			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

### APPLICABLE INCIDENT INFORMATION

Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.	CRASH	NUMBER OF PERSONS INJURED	CAUSE OF INCIDENT	RESULT OF INCIDENT
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0 1 2 3 4 5 6 7 8 9	<input type="checkbox"/> Wear/Corrosion/Rust <input type="checkbox"/> Weak/Poor Fit/Loose <input type="checkbox"/> Cut/Torn <input type="checkbox"/> Drunkenness/Fell Off <input checked="" type="checkbox"/> Erratic/Poor Performance <input type="checkbox"/> Excessive Effort <input type="checkbox"/> Numb <input type="checkbox"/> Leaks <input type="checkbox"/> Shims <input type="checkbox"/> Locks/Sticks/Grabs <input type="checkbox"/> Stability/Vibration <input type="checkbox"/> Broken	<input type="checkbox"/> Explosion/Fire <input type="checkbox"/> Loss of Control <input checked="" type="checkbox"/> Poor Visibility <input type="checkbox"/> Inadvertent Start <input type="checkbox"/> Roll-over <input type="checkbox"/> Stalls <input type="checkbox"/> Sudden Acceleration
	FIRE	NUMBER OF FATALITIES		
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0 1 2 3 4 5 6 7 8 9		

PLEASE DO NOT WRITE IN THIS AREA



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Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

The Windshield wipers will randomly stop operating. If I had been informed of the problem, I would of had the system checked long ago but the incidents were infrequent. Recently the problem has become worse. So I looked into the problem further. I found the problem to be similar to the one described in NHTSA Campaign Number: 98V150001. I had a nearby dealership inspect the wiper motor, and asked them to identify the motor as being the one from the aforementioned campaign, as the updated motor. They identified it as the campaign motor. I paid to have them install the updated wiper motor, and now everything works correctly. GM would not pay for this because my manufacture date is SLIGHTLY beyond the dates for the campaign. I think GM should reimburse me for the repair since my vehicle had been built with the defective wiper motor.

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974 - Public Law 93-579 The information is requested pursuant to authority vested in the National Highway Traffic Safety Administration. You are under no obligation to respond to the questionnaire. Your response may be used to assist the NHTSA in determining whether a regulatory standard is appropriate to correct a safety defect. The letter proceeds with appropriate explanation of Mutual consent of manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

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NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL 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  
Office of Defects Investigation, NSA-10.01  
400 7th Street, SW  
Washington, DC 20590



Complete and return or place in your car manual for future use



**VEHICLE OWNER'S QUESTIONNAIRE (VOQ)**

**DOT AUTO SAFETY HC**

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

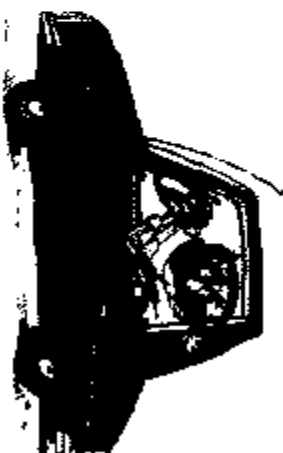
**DASH 2 DOT**

and dial toll free at

**1-888-DASH-2-**

**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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[www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

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