



SEP 29 2003

CERTIFIED MAIL RETURN RECEIPT REQUESTED

Mr. Lyndon R. Lie, Director Product Investigations General Motors Corporation Mail Code 480-106-304 30500 Mound Road Warren, MI 48090-9055

NVS-212kmb PE03-042

Dear Mr. Lie:

This letter is to inform you that the Office of Defects Investigation (ODI) of the National Highway Traffic Safety Administration (NHTSA) has opened a Preliminary Evaluation (PE03-042) to investigate allegations of windshield wiper failure in MY 2002 - 2003 Chevrolet Trailblazer, GMC Envoy, and Oldsmobile Bravada vehicles manufactured by General Motors Corporation (GM), and to request certain information about these and other vehicles as defined below.

This office has received 10 reports of windshield wiper failure in MY 2002 - 2003 Chevrolet Trailblazer, GMC Envoy, and Oldsmobile Bravada vehicles. The complainants allege that the windshield wipers cease operation while driving or fail to turn on when needed. Some complainants allege the wipers fail to operate during heavy precipitation or after using an automatic car wash due to water intrusion into the wiper motor and/or electronic control module. One complainant reports that the wipers will function again after the vehicle has completely dried. Some complainants also allege multiple replacements of the wiper motor and/or control module have failed to adequately remedy the problem.

In addition, ODI has received eight other reports that allege the windshield wipers inadvertently turn on without driver action, fail to turn off using the control switch, or the automatic moisture-sensitive wipers stop before completing an entire sweep. A copy of each of the reports is enclosed for your information.





Unless otherwise stated in the text, the following definitions apply to these information requests:

- Subject vehicles: All MY 2002 2004 Buick Rainier, Chevrolet Trailblazer, GMC
 Envoy, Isuzu Ascender, and Oldsmobile Bravada vehicles manufactured for sale or lease
 in the United States and all other vehicles manufactured by or for GM for sale or lease in
 the United States which use the same or substantially similar windshield wiper system.
- <u>Subject components</u>: The windshield wiper assembly including motor, electronic
 control module, module cover, and transmission linkage; automatic moisture sensor; and
 wiper control switch manufactured on the subject vehicles.
- GM: General Motors Corporation, all of its past and present officers and employees, whether assigned to its principal offices or any of its field or other locations, including all of its divisions, subsidiaries (whether or not incorporated) and affiliated enterprises and all of their headquarters, regional, zone and other offices and their employees, and all agents, contractors, consultants, attorneys and law firms and other persons engaged directly or indirectly (e.g., employee of a consultant) by or under the control of GM (including all business units and persons previously referred to), who are or, in or after 1999, were involved in any way with any of the following related to the alleged defect in the subject vehicles:
 - Design, engineering, analysis, modification or production (e.g. quality control);
 - b. Testing, assessment or evaluation;
 - Consideration, or recognition of potential or actual defects, reporting, record-keeping and information management, (e.g., complaints, field reports, warranty information, part sales), analysis, claims, or lawsuits; or
 - d. Communication to, from or intended for zone representatives, fleets, dealers, or other field locations, including but not limited to people who have the capacity to obtain information from dealers.
- Alleged defect: Windshield wipers fail to operate.
- <u>Document</u>: "Document(s)" is used in the broadest sense of the word and shall mean all original written, printed, typed, recorded, or graphic matter whatsoever, however produced or reproduced, of every kind, nature, and description, and all non-identical copies of both sides thereof, including, but not limited to, papers, letters, memoranda, correspondence, communications, electronic mail (e-mail) messages (existing in hard copy and/or in electronic storage), faxes, mailgrams, telegrams, cables, telex messages, notes, annotations, working papers, drafts, minutes, records, audio and video recordings, data, databases, other information bases, summaries, charts, tables, graphics, other visual displays, photographs, statements, interviews, opinions, reports, newspaper articles, studies, analyses, evaluations, interpretations, contracts, agreements, jottings, agendas, bulletins, notices, announcements, instructions, blueprints, drawings, as-builts, changes, manuals, publications, work schedules, journals, statistical data, desk, portable and computer calendars, appointment books, diaries, travel reports, lists, tabulations, computer printouts, data processing program libraries, data processing inputs and outputs,

microfilms, microfiches, statements for services, resolutions, financial statements, governmental records, business records, personnel records, work orders, pleadings, discovery in any form, affidavits, motions, responses to discovery, all transcripts, administrative filings and all mechanical, magnetic, photographic and electronic records or recordings of any kind, including any storage media associated with computers, including, but not limited to, information on hard drives, floppy disks, backup tapes, and zip drives, electronic communications, including but not limited to, the Internet and shall include any drafts or revisions pertaining to any of the foregoing, all other things similar to any of the foregoing, however denominated by GM, any other data compilations from which information can be obtained, translated if necessary, into a usable form and any other documents. For purposes of this request, any document which contains any note, comment, addition, deletion, insertion, annotation, or otherwise comprises a non-identical copy of another document shall be treated as a separate document subject to production. In all cases where original and any non-identical copies are not available, "document(s)" also means any identical copies of the original and all non-identical copies thereof. Any document, record, graph, chart, film or photograph originally produced in color must be provided in color. Furnish all documents whether verified by GM or not. If a document is not in the English language, provide both the original document and an English translation of the document.

• Other Terms: To the extent that they are used in these information requests, the terms "claim," "consumer complaint," "dealer field report," "field report," "fire," "fleet," "good will," "make," "model," "model year," "notice," "property damage," "property damage claim," "rollover," "type," "warranty," "warranty adjustment," and "warranty claim," whether used in singular or in plural form, have the same meaning as found in 49 CFR 579.4.

In order for my staff to evaluate the alleged defect, certain information is required. Pursuant to 49 U.S.C. § 30166, please provide numbered responses to the following information requests. When documents are produced, the documents shall be produced in an identified, organized marmer that corresponds with the organization of this information request letter (including all individual requests and subparts). When documents are produced and the documents would not, standing alone, be self-explanatory, the production of documents shall be supplemented and accompanied by explanation.

Please repeat the applicable request verbatim above each response. After GM's response to each request, identify the source of the information and indicate the last date the information was gathered.

- State, by model and model year, the number of subject vehicles GM has manufactured for sale or lease in the United States. Separately, for each subject vehicle manufactured to date by GM, state the following:
 - Vehicle identification number (VIN);
 - b. Make;
 - c. Model:

- d. Model Year;
- e. Date of manufacture;
- Date warranty coverage commenced;
- g. The State in the United States where the vehicle was originally sold or leased (or delivered for sale or lease); and
- h. Whether the vehicle is equipped with Rainsense™ automatic moisture-sensitive wipers.

Provide the table in Microsoft Access 2000, or a compatible format, entitled "PRODUCTION DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

- State the number of each of the following, received by GM, or of which GM are otherwise aware, which relate to, or may relate to, the alleged defect in the subject vehicles:
 - Consumer complaints, including those from fleet operators;
 - Field reports, including dealer field reports;
 - c. Reports involving a crash, injury, or fatality, based on claims against the manufacturer involving a death or injury, notices received by the manufacturer alleging or proving that a death or injury was caused by a possible defect in a subject vehicle, property damage claims, consumer complaints, or field reports;
 - d. Property damage claims; and
 - e. Third-party arbitration proceedings where GM is or was a party to the arbitration; and
 - f. Lawsuits, both pending and closed, in which GM is or was a defendant or codefendant.

For subparts "a" through "d," state the total number of each item (e.g., consumer complaints, field reports, etc.) separately. Multiple incidents involving the same vehicle are to be counted separately. Multiple reports of the same incident are also to be counted separately (i.e., a consumer complaint and a field report involving the same incident in which a crash occurred are to be counted as a crash report, a field report and a consumer complaint).

In addition, for items "c" through "d," provide a summary description of the alleged problem and causal and contributing factors and GM's assessment of the problem, with a summary of the significant underlying facts and evidence. For items "e" and "f," identify the parties to the action, as well as the caption, court, docket number, and date on which the complaint or other document initiating the action was filed.

- 3. Separately, for each item (complaint, report, claim, notice, or matter) within the scope of your response to Request No. 2, state the following information:
 - a. GM's file number or other identifier used;
 - The category of the item, as identified in Request No. 2 (i.e., consumer complaint, field report, etc.);
 - Vehicle owner or fleet name (and fleet contact person), address, and telephone number;
 - d. Vehicle's VIN;
 - e. Vehicle's make, model and model year;
 - Vehicle's mileage at time of incident;

- g. Incident date;
- Report or claim date;
- Whether a crash is alleged;
- Whether property damage is alleged;
- k. Number of alleged injuries, if any; and
- 1. Number of alleged fatalities, if any.

Provide this information in Microsoft Access 2000, or a compatible format, entitled "COMPLAINT DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

- 4. Produce copies of all documents related to each item within the scope of Request No. 2. Organize the documents separately by category (i.e., consumer complaints, field reports, etc.) and describe the method GM used for organizing the documents.
- 5. State, by model and model year, a total count for all of the following categories of claims, collectively, that have been paid by GM to date that relate to, or may relate to, the alleged defect in the subject vehicles: warranty claims; extended warranty claims; claims for good will services that were provided; field, zone, or similar adjustments and reimbursements; and warranty claims or repairs made in accordance with a procedure specified in a technical service bulletin or customer satisfaction campaign.

Separately, for each such claim, state the following information:

- GM's claim number;
- b. Vehicle owner or fleet name (and fleet contact person) and telephone number;
- c. VIN;
- Repair date;
- e. Vehicle mileage at time of repair;
- f. Repairing dealer's or facility's name, telephone number, city and state or ZIP code;
- g. Labor operation number;
- Problem code;
- Replacement part number(s) and description(s);
- j. Concern stated by customer; and
- k. Comment, if any, by dealer/technician relating to claim and/or repair.

Provide this information in Microsoft Access 2000, or a compatible format, entitled "WARRANTY DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

6. Describe in detail the search criteria used by GM to identify the claims identified in response to Request No. 5, including the labor operations, problem codes, part numbers and any other pertinent parameters used. Provide a list of all labor operations, labor operation descriptions, problem codes, and problem code descriptions applicable to the alleged defect in the subject vehicles. State, by make and model year, the terms of the new vehicle warranty coverage offered by GM on the subject vehicles (i.e., the number of months and mileage for which

coverage is provided and the vehicle systems that are covered). Describe any extended warranty coverage option(s) that GM offered for the subject vehicles and state by option, model, and model year, the number of vehicles that are covered under each such extended warranty.

- 7. Produce copies of all service, warranty, and other documents that relate to, or may relate to, the alleged defect in the subject vehicles, that GM has issued to any dealers, regional or zone offices, field offices, fleet purchasers, or other entities. This includes, but is not limited to, bulletins, advisories, informational documents, training documents, or other documents or communications, with the exception of standard shop manuals. Also include the latest draft copy of any communication that GM is planning to issue within the next 120 days.
- 8. Describe all assessments, analyses, tests, test results, studies, surveys, simulations, investigations, inquiries and/or evaluations (collectively, "actions") that relate to, or may relate to, the alleged defect in the subject vehicles that have been conducted, are being conducted, are planned, or are being planned by, or for, GM. For each such action, provide the following information:
 - a. Action title or identifier,
 - The actual or planned start date;
 - c. The actual or expected end date;
 - d. Brief summary of the subject and objective of the action;
 - Engineering group(s)/supplier(s) responsible for designing and for conducting the action;
 and
 - f. A brief summary of the findings and/or conclusions resulting from the action.

For each action identified, provide copies of all documents related to the action, regardless of whether the documents are in interim, draft, or final form. Organize the documents chronologically by action.

- 9. Describe all modifications or changes made by, or on behalf of, GM in the design, material composition, manufacture, quality control, supply, or installation of the subject components, from the start of production to date, which relate to, or may relate to, the alleged defect in the subject vehicles. For each such modification or change, provide the following information:
 - The date or approximate date on which the modification or change was incorporated into vehicle production;
 - A detailed description of the modification or change;
 - c. The reason(s) for the modification or change;
 - d. The part numbers (service and engineering) of the original component;
 - e. The part number (service and engineering) of the modified component;
 - f. Whether the original unmodified component was withdrawn from production and/or sale, and if so, when:
 - g. When the modified component was made available as a service component; and
 - Whether the modified component can be interchanged with earlier production components.

Also, provide the above information for any modification or change that GM is aware of which may be incorporated into vehicle production within the next 120 days.

Produce one of each of the following:

- Exemplar samples of each design version of the subject components;
- b. Field return samples of the subject components exhibiting the subject failure mode; and
- c. Any kits that have been released, or developed, by GM for use in service repairs to the subject components/assemblies which relate, or may relate, to the alleged defect in the subject vehicles.
- 11. State the number of each of the following that GM has sold that may be used in the subject vehicles by component name, part number (both service and engineering/production), model and model year of the vehicle in which it is used and month/year of sale (including the cut-off date for sales, if applicable):
 - a. Subject components; and
 - b. Any kits that have been released, or developed, by GM for use in service repairs to the subject components/assemblies.

For each component part number, provide the supplier's name, address, and appropriate point of contact (name, title, and telephone number). Also identify by make, model and model year, any other vehicles of which GM is aware that contain the identical component, whether installed in production or in service, and state the applicable dates of production or service usage.

- 12. Furnish GM's assessment of the alleged defect in the subject vehicle, including:
 - a. The causal or contributory factor(s);
 - b. The failure mechanism(s);
 - c. The failure mode(s);
 - d. The risk to motor vehicle safety that it poses; and
 - e. The reports included with this inquiry.

This letter is being sent to GM pursuant to 49 U.S.C. § 30166, which authorizes NHTSA to conduct any investigation that may be necessary to enforce Chapter 301 of Title 49 and to request reports and the production of things. It constitutes a new request for information. GM's failure to respond promptly and fully to this letter could subject GM to civil penalties pursuant to 49 U.S.C. § 30165 or lead to an action for injunctive relief pursuant to 49 U.S.C. § 30163. (Other remedies and sanctions are available as well.) Please note that maximum civil penalties under 49 U.S.C. § 30165 have increased as a result of the recent enactment of the Transportation Recall Enhancement, Accountability, and Documentation (TREAD) Act, Public Law No. 106-414 (signed November 1, 2000). Section 5(a) of the TREAD Act, codified at 49 U.S.C. § 30165(b), provides for civil penaltics of up to \$5,000 per day, with a maximum of \$15 million

for a related series of violations, for failing or refusing to perform an act required under 49 U.S.C. § 30166. This includes failing to respond to ODI information requests.

If GM cannot respond to any specific request or subpart(s) thereof, please state the reason why it is unable to do so. If on the basis of attorney-client, attorney work product, or other privilege, GM does not submit one or more requested documents or items of information in response to this information request, GM must provide a privilege log identifying each document or item withheld, and stating the date, subject or title, the name and position of the person(s) from, and the person(s) to whom it was sent, and the name and position of any other recipient (to include all carbon copies or blind carbon copies), the nature of that information or material, and the basis for the claim of privilege and why that privilege applies.

GM's response to this letter, in duplicate, together with a copy of any confidentiality request, must be submitted to this office by November 12, 2003. Please refer to PE03-042 in GM's response to this letter. If GM finds that it is unable to provide all of the information requested within the time allotted, GM must request an extension from me at (202) 366-5218 no later than five business days before the response due date. If GM is unable to provide all of the information requested by the original deadline, it must submit a partial response by the original deadline with whatever information GM then has available, even if an extension has been granted.

If GM claims that any of the information or documents provided in response to this information request constitute confidential commercial material within the meaning of 5 U.S.C. § 552(b)(4), or are protected from disclosure pursuant to 18 U.S.C. § 1905, GM must submit supporting information together with the materials that are the subject of the confidentiality request, in accordance with 49 CFR Part 512, as amended (68 Fed. Reg. 44209 et seq; July 28, 2003), to the Office of Chief Counsel (NCC-113), National Highway Traffic Safety Administration, Room 5219, 400 Seventh Street, S.W., Washington, D.C. 20590. GM is required to submit two copies of the documents containing allegedly confidential information (except only one copy of blueprints) and one copy of the documents from which information claimed to be confidential has been deleted.

If you have any technical questions concerning this matter, please call Mr. Kyle Bowker of my staff at (202) 366-9597.

Sincerely,

Thomas Z. Cooper, Chief Vehicle Integrity Division

Office of Defects Investigation

Enclosure 1, One CD-ROM titled "PE03-042 Data Collection Disc" containing three files

Enclosure 2, PE03-042 ODI Resume

Enclosure 3, Subject Vehicle Owner Questionnaires



U.S. Department of Transportation

National Highway
Traffic Safety
Administration

ODI RESUME

Investigation: PE03-042 Prompted By: IE03-042 Date Opened: 09/17/2003

Principal Investigator: Kyle Bowker Subject: Windshield Wiper Failure

Manufacturer: General Motors Corp.

Products: 2002-03 Chevrolet Trailblazer, GMC Envoy, Oldsmobile Bravada

Population: 662,000

Problem Description: Windshield wipers fail to operate while driving.

FAILURE REPORT SUMMARY

	ODI	Manufacturer	Total
Complaints:	10	0	10
Crashes/Fires:	0	. 0	0
Injury Incidents:	0	0	0
# Injuries:	0	0	0
Fatality Incidents:	0	0) 0
#Fatalities:	0	0	0
Other*:	8	0	8

*Description Of Other: See summary description.

Action: A PRELIMINARY EVALUATION HAS BEEN OPENED.

 Engineer:
 Kyle M. Bowker
 KMS
 Date:
 09/17/2003

 Div. Chief:
 Thomas Z. Cooper
 Date:
 09/17/2003

 Office Dir.:
 Kathleen C. DeMeter
 Date:
 09/17/2003

Summary: ODI has received 10 reports of windshield wiper failure in the subject vehicles. The complainants allege that the windshield wipers cease operation while driving or fail to turn on when needed. In addition, ODI has received 8 reports that allege the windshield wipers inadvertently turn on without driver action, fail to turn off using the control switch, or the automatic moisture-sensitive wipers stop before completing an entire sweep. Two complainants allege that the windshield wipers quit while driving or failed to turn on when needed and at another time inadvertently turned on without driver action.

SUBJECT COMPLAINTS

ODI	MAKE	MODEL	MY	VIN
10006025	CHEVROLET	TRAILBLAZER	2002	1GNET16S226115797
10010324	CHEVROLET	TRAILBLAZER	2002	1GNET16S526122730
786021	CHEVROLET	TRAILBLAZER	2002	1GNDT13S622128530
10021338	CHEVROLET_	TRAILBLAZER	2002	1GNES16S526110788
10000437		•		
10008175				
10017006				
10029329	CHEVROLET	TRAILBLAZER	2002	1GNES16S526112671
10023522	CHEVROLET	TRAILBLAZER	2003	1GNET16S836105549
10020552	GMC	ENVOY	2003	1GKET16SX36125637
10023198	GMC	ENVOY	2003	1GKET16S736132559
10000118	GMC	ENVOY	2003	1GKES16S836118625
10025971	OLDSMOBILE	BRAVADA	2002	1GHDT13S022156861

								Por se Avec		M.B. No. 2127-0001	
		DOT Auto	Safety Ho	tline			FO	R AGENCY USE ON	LY 2,5	2	
U.S. Department of Transportation		icie Owne ro Report Vei	hicle Šafe	ty Def			Date Res	relyed	Repos	itory 🗌	
National Highw	WEY	1-868-DA5H-2-DOT					1 30	-)AN-2003	Refer	ence No.	
Traffic Safety	TMT	(1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline]			6025	
Administration	1						ì				
<u> </u>	OWNER INFOR	MATION (Type	or Print)				Daytime*	Telephone Number	E-mail.	Address	
Name	_										
Address		160-00	State no Zip Code				Evening '	Telaphone Number	1		
CITY GLENSHA	w					<u> </u>	·	<u> </u>			
Do you authorize h In the absence of a	IHTSA to provide :	a capy of this rej	port to the d Tarabida w	manufec ove nam	turer of you a or addrso	y vet s to t	ikie? ho vehicie	□ yes 🗷	NO		
Signature of Owne	F		, p. 04:02 ye	Oth weigh		Date		<u>I</u>			
			VBHCL	I INFO	MOTTAMS		-				
17 digit Vehicle Identif	Sextlen Number Locah	ed at bottom of win			Make			Model	T,	todal Year	
1GNET1652261157	CHEVROLET					ET		TRAILBLAZER	- :	2002	
Date Purchase		me and Telephon EVROLET 724-93			1			Engine: No: Cylinders	+	Fuel Type:	
Original Owner	Dealer's City	,			State	Zip (Code	NO. CYBRICES			
Transmission Type	Antillock Braikes	Powertrain			Vehicle Co	SM904	ment Code				
Hallshessell (yes	_	POWERIAN						SHIELD WIPER/WA	SHER: M	ICTOR	
	Cruise Control				Multiple F	adure	: 3				
		FAIL	ED COMPO	NENT(8)/PART(S)	INFO	RMATIO	H			
Incident Date(s) 06-JAN-2003	Fallure Mileage	Failure Speed									
	ADDI	TONAL ITEMS	TO BE COM	PIFIE	WHENDE	MODT	ZNG A TI	IP SATILIEP			
Tre Make	7,000		(Name or N				Tire Size (Example P215/65R15)				
DOY No. (Example: D	(BEGÖBARIAMTOX	Origin	ral Equipmen Repair	nt	Fallure Loc	ætfon					
Tire Component Code	<u> </u>						The	Failure Type			
· · · · · · · · · · · · · · · · · · ·	ADDITION	AL ITEMS TO B	ECOMPLE	TED WA	EN REPOR	RNG					
Maka:	×=04124		Date Manu				Model No.				
Seat Type:			Installation				Librari 140	<u> </u>		 -	
Child Seat Componer	nt Code:	Falled Part:						.			
					T INFORM						
Cresh)	Fire	Please departer Number of Per			<i>l Famure(s</i>), C mider of Dea		_	ed to Police			
Y⊵s XINo	☐ Yes . X No						N-Cpair	N			
Marrative Description Please describe (1) Le, parte repaired o	events leading Up	to the fallows, (2) failure and	i its com	de que stac ,	and [3) what w	us done to correct	the in it	tre;	
THE WINDSHIPLD V				WHILE	DREVING IN	RAIN	. DEALER	IS AWARE OF THE	PROBLE	M. TS*AK	

Include, if available: Police/Fre Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY
The Privacy Act of 1974-Audit Line 93-579 This information is requested pursuant to a attentity vested in the lithtonial Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this quantitosistics. Your response may be used to assist the BHTSA is determining whether a standard currer should take appropriate action to correct a unique defeat. If the BHTSA precede with appropriate enforcement or Rightien applicat a missinfecturer, your response, or a statistical assumery thereof, may be used in support of the agency is action.

			N	OT AURA!	الشائلات	in the s			Fi	OR ACCENTAL LUCE O	WY]{[]
U.S. Departm of Transportat Mational Mig- Tra Mg Safet Administrati	ion humy	1	icle To Re	Owner port Vel 1-888-i (1-888	r's Qu ilcle Sa DASH-2 -327-4	estion futy Der 2-DOT 236)	fects		Date Re		1 2	pository [
Maria	OW	NER INFO	MAT.	МИ (Тура	or Print	9			Čra dime	Tale-land No. of a	╁╾	****
Address									caytine	Telephona Numbe	r [E-m	M Address
City GLENS	ww.	···		State	PR	Zip Code			Evening	Talephone Number		
Do you setherize In the steeres of Signature of Own	f an auth	to provide orisation, i	a copy IHTSA	of this rep WILL NOT	ort to the provide	menufaç yavr qam	turer of you a or addres	神物性	ne wehicle	Handacturer.	OW D	
03-3000 0 0					VENT		UNIATION	Date				
17 Per 19 % to 16 mg	797	. سرخ اس.			ahled no c	"不是 "我们 "我们	Mehri CHEVROL	ET		Mode <u>!</u> Trajlelazer		10001 Year 2002
Date Purchas 5/2/10/3 Original Owner		Dealer's Na Baler's City Dealer's City	<u>(C</u> h	Telephone	Number	<u>(721</u>	1) 935 · State	57 260		Engine: No: Cylinders		Fuel Type :
Transmission Type	1=	lock Brekes ise Contro!	Pow	ertrain	-		Vehicle C 136200 V Multiple F	121BU	TY:WIND	SHIELD WIPER/W/	\SHEA	:MOTOR
				FATER	D COMP	OBSMT/#1	/PART(S)					
Incident Date(s) 06-1AN-2003	Faikre	Misage		e Speed	ስታርር ልዛል	الا هـ • الا و كما ركا	eter y	enist enist	you	dates/m		. م نصر 3 پد
Tire Make		Aboti	TOTAL	LITEMS TO Tre Model (DE COL	PLETED	WHEN REP	ORT		FAILURE	_	
	Land II	· • • • • • • • • • • • • • • • • • • •								Stre (Example P2)	L5/65R	:15)
DOT No. (Example:		9ABCU36)	_	Crigina Prilog Ri	i Equipme apair	ent:	Failure Loc	ation:				
Fire Component Cod										Failure Type		
		DOTTION	AL ITE	MS TO BE	CUMPL	ETED WH	N REPORT	ING Á		FEAT PAILURE	_	
Make:						ufactured:			lodel No.,		_	
Seat Type:					reta latio	n System						
Chiki Seat Compone	nt Code:		Fal	ed Part:								

Fire Yes X No ∏Yes XINo. Numbthe Description of Incident(5), Crash(es), and Injury(les). Please describe (2) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; Le, party repaired or replaced (and if old part is evaluable). THE WINDSHIELD WIPER WORKS INTERMITTENLY WITHOUT PRIOR WARNING, DEALER IS AWARE OF THE PROBLEM.

Number of Persons Injured

(Please describe in detail the Incidentits), Fathwells), Croshles), and injury fies))

Number of Deaths

Reported to Police

I have lost total windshield unper furction 3 times with this behicle the piened and thirty whereast occurring which there drivers the vehicle and thirty whereast occurring while drivers the vehicle and it placed to paint which for lives able to paint for period over period there have three kinds for years lives able the may not be said buckly here have three kinds for years lives the me may not be said buckly

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Lay 99-575 This inferrention is requested puriously to authority vested in the National Highway Traylic Safety Act and subsequent savigadients. You are under no obligation to respond this questions in. Your responde may be used to suite the MITSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the fetting processes with administrative enforcement or Rightion against a manufacturer, your response, or a statistical surrounding thereof, stay he would be support of the housey's action.





2569405 HOURS: MON - THURS 7:30 s.m. - 6:30 p.m. - FF# 7:30 s.m. - 6:00 p.m. - SAT 8:00 s.m. - 2:00 p.m.



CTC\$323976

PRODUCTION OF THE

T20851

CANADA NO.		. ADVINOR		TAUNO
		LONG CHRIST	1206	118
		Carle Nate	1	1025
		VEAR / VAKE / SIGNA	<u> </u>	1.0124
		OZICHEVROLE	T THUCKISTABLELA	ZER/TRAIL
		AND THE PARTY OF T		
DIFUMIAN DI		16 NET183	<u> </u>	O. NO
GLENSHAW, PA		r	ſ	3 .10
SHOUNGE PHONE.	BULINESS PRINE	COMMENTE		
 ABOR_ <u>&_Pa</u> rts	4300	unus. 5 26 IFCHI	5) 1002	WARRANTY
		HOURS: 0.30 TECH(S NOISE FROM FROMT OF MOTO IN COULD NOT DUPLICATE A IT IS NOT MORNAL FOR THIS		Madelli
ARTSQTYEP-	**************************************	DESCRIPTION	LIST PRICE-UNIT PA JOB # 1 TOTAL PA	RTCE- Arts 0.00
		re #	TITTAL LARGE & P.	ARTS 0.00
CHECKE GROWNS MIRING FOUND N MOTOR	COMPANY OF THE PROPERTY OF THE	HOURS: 4.70 TECHIS DIME ON BY THRIPSELPS IMILIA UPPLICATE INTERMITTENT CON L CONNECTIONS AT SMITCH COMPARTHENT FOR OPEN OR SIDE MIRE COMPECTOR TO M DOUTE. REPLACED TERMINA ILLIAM MIRE. MASHER IMOPEL SERREY OPEN MEC TO REJI SS. TO CURE WATER IMIRU	RACING SHORT IPER (2)	MARRANTY
4RT5()TYFP- 128 ≱ 2 1 128 ≱ 2 1	MARER	NORULE 16.064 PURP NSW 10.153	LIST PRICE-UNIT P JOB # 2 TOTAL P	RICE- WARRANTY WARRANTY ARTS 0.00
			2 TOTAL LABOR & P	ARTS 0.00
(BLFTPO} (B ≠ 1 191523	VEND INVESTIGATION OF 11	ATE DESCRIPTION	TOTAL - SU	WARRANTY BLET 0,00
- . -		SALE # /U		

ALL NEW OR FACTORY REBUILT PARTS ARE GUA-RANTEED 12 MONTHS OR 12,000 MILES, WHICHEVER COMES FIRST.



08/11/02

LT PEWTER M

05/21/02 BOLLING DEAL ET HIS

06/10/02



BAIERL CONVENIENCES:

- 1. Certified Technicians
- 2. Early Drop Off
- 3. Med. Duty Truck Shop
- 4. North Hills Shuttle
- Complete Body Shop
- 6. Discount Rentals
- 7, 29 Mln. Quick Lube
- 8. Genuine GM Parts
- 9. Saturday Hours
- 10. We Service Most GM Cars & Trucks

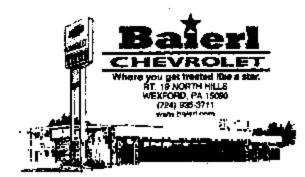
IMPORTANT

YELL MAY RECEIVE A QUESTIONNIAIRE FROM DISCHROLET MOTOR SPYCHON ON THE FEXT FEW DAYS. IF FOR ANY PEASON YOU CANNOT GRADE US AS COMPLETELY GATISPED PLEASE CALL, JAY GASGE, SERVICE ADMINISTRATOR. THANK TOU.

TAKEN CHEVROLET (724) RO-3711 YOUR SATISFACTION IS CURI NO : CONTONIO

[CONTINUED ON NEXT PAGE]







INVOICENC

c67622331551

DE NOTE ALEE

PRODUCTION DATE

	SERVICE HOURS	MON - THURS 720 aut	6:30 p.m. FRI 7:30 LM.	- 6:00 p.m. BAT 8:00 a.m.	- 3:00 p.m
CUSTOMER HO		ADVISOR		TAGNO	PAROCE DATE
		JUMICHAEL PI	/GLICAL add 83	HEELER 277	c08/38/02
•		VENEZ AWART MOD	<u></u>	- -3436	LICENSON M
			let truck/trassla	rentall.	-95173497 ₅₃ -42
					SESTEMBER NO
BLENSHAW, PA		 ,+68,ET11	08220116797	Q MO	A O, DATE
PERCENCIA PROPE	BEFERS ACHE	COMMENTS		··	+ 08/12/02
		<u> </u>			
					ALL NEW
LABOR & PARTS	ELECTRICAL	HOURS: 1.60 TEC	H(S):1095	WARNITY	REBUILT (
CUSTOMER		_			RANTEED
	TERMINAL IN COMPET	GROUNDS AS PER CHART TION FROM PREVIOUS IN NEC TO INSTALL HER E	FPAIR ND PLUE		12,000 Mil
INSTALL	ATPER WOODLE				COMES F
PARTS QTY FP-M	CMBER	negraterick	LEST PRECE-UNIT A	RICE-	
	2497697 \$304715	HOTHLE 16.064 TERMINAL	JOB # 1 TOTAL !	SERGERANTY	
					GAAD
			1 TUTAL LABOR # 1		Аррго
J# 2 10CTZ	BODY STATES: FRONT OF		H(S): 1095 SUNROOF	0.00	Autof
SOUFFICE	SEENS LIKE HEADLE L HEADLENER	MER LOOSE.			i
PARTSQTYFP-N			LIST PRICE-UNIT!	RICE-	BAIERL C
MK(2. a. a. d) (a. a. b. a.			-		
			2 TOTAL LABOR 4		1. Certifi
J# 3+09C1Z	DRIVABILITY	HOURS: 3,30 TEC IDER LIGHT ON. 2 THISTALLED SHOKE IN TANK, LINSTALLED FI TALL SECOND VANK	H(S):1095	WARRANTY	2. Early
SCANNER SCANNER	CHECOED WITH TEEN	2 Mestalled shoke	TEST CHECKED		3. Med.
etir Lear Broken y	IPPLE . HEC TO INC	TALL SECOND TANK	ngi men iouz		4. North
PARTS QTY FP-N	心尼死	DESCRIPTION	LIST PRICE-LINTT	PRICE-	5. Comp
306.≱3 1 1	15181567	HANK ASH 3.001	JOB # 3 TOTAL	PARTS 0.00	6. Disco
		J08 á	3 TOTAL LABOR B	PARTS 0.00	7. 29 Mi
SUBLET PO# JOB # 1 202956	VEND INWELINY DA	TE-DESCRIPTION		WARRANTY	8. Genu
J08 1 202956	D8/28/	2 16 DAYS REATAL	TOTAL - 9		9. Satur
					J. OB.

ALL NEW OR FACTOR REBUILT PARTS ARE GL RANTEED 12 MONTHS (12,000 MILES, WHICHEVI COMES FIRST.





BAJERL CONVENIENCES

- 1. Certified Technicians
- 2. Early Drop Off
- 3. Med. Duty Truck Sho
- 4. North Hills Shuttle
- 5. Complete Body Shop
- 6. Discount Rentals
- 7. 29 Min. Qulck Lube
- 8. Genuine GM Parts
- 9. Saturday Hours
- 10. We Service Most GM Cars & Trucks

IMPORTANT

YOU MAY RECEIVE A QUICKTION FROM CHEVROLET MOTOR DIVISION IN THE NEXT FEW DAYS IF FOR ANY READON YOU CANNOT GRADE US AS COMPLETELY SATISFIED? PLEASE CALL JAY GACHE, SERVICE ADMINISTRATOR. THANK YOU.

BARRI CHEVROLET (724) 435-3711 YOUR SATISFACTION IS OUR NE 1 CONCESSE 28

PAGE 1 OF 2

CUSTOMER COPY

[CONTINUED ON NEXT PAGE]







IMVOICE NO

PRODUCTION DATE

	SERVICE HOURS	S: MON - THURS 7:30 a.r.	<u>. 630 p.m. FRI 730 a.m.</u>	- 6.00 p.m. SAT 8:00 a.m	L - 3:00 p.m				
LETOMET NO		ADMRSOR		TAG NO.	BAYOUCE CATTE				
		LASSIFIA E	L POLICIESE 1363 -	377	- 08/30/02 -				
• .		VEAR / MAKE /	MODE!	3435	ORLWEST DATE				
			AGUET THUCK(TRANSLA	IZER/TRAIL	05/21/02 SELLINE BEAUER NO				
GLENSHAW. PA		_10NE1	10 NET 1-5822-81157-87						
-					IR G.DATE				
PAID ENER MECHE	BUBINEBIS PHONE	COMMENTS							
	DRIVABILITY MER STATES: CHECK EN TO REPLACE WITH SECON TP-MINEER 15181557	TANK ASH 3.001	JOS # 1 TOTAL	PAK43 U.UG	ALL NEW REBUILT I RANTEED 12,000 MII COMES F				
		JQ:	₽ 2 TOTAL LABOR &	PARTS 0.00	į				
CASH () CHECK YISA/HC ()	DISCOVER ()	\mathcal{P}_{w}	TOTAL LABO TOTAL SART TOTAL S. D. TOTAL HISC TOTAL HISC TOTAL YAX.	S 0.00 FT 0.00	Appro Auto F				
THANK YOU FOR YOUR	1111 SEPROSTAL		TOTAL IMMO	TCE \$ 0.00	BAIERL C				
CLISTOMER PAYMENT	FOR PARTS INDICATED E	şγ " * "			1. Certifi				
HAVE A CLAU	TED LIFETINE WARRANTY				2. Еалу				
					3. Med.				
Customer St	(Sear) fue:				4. North				
					5. Comp				
					6. Disco				
					7. 29 Mil				
					8. Genul				
					9. Saturo				
					10. We S				
			•		GM C				
					· · ·				

ALL NEW OR FACTORY REBUILT PARTS ARE GUA-RANTEED 12 MONTHS OR 12,000 MILES, WHICHEVER COMES FIRST.





BAIERL CONVENIENCES:

- 1. Certified Technicians
- 2. Early Drop Off
- 3. Med. Duty Truck Shop
- 4. North Hills Shuttle
- 5. Complete Body Shop
- 6. Discount Rentals
- 7. 29 Mln. Quick Lube
- 8. Genuine GM Parts
- 9. Saturday Hours
- 10. We Service Most GM Cars & Trucks

IMPORTANT

YOU MAY RECEIVE A QUESTIONING MICH. PROMICHEYROLET MOTOR DIVISION BY THE NEXT FEW DAYS, IF FOR ANY HEASON YOU CANNOT GRADE US AS COMPLETELY SATISHED: FLEASE CALL JAY GAGGE, SERVICE ADMINISTRATOR. THANK YOU.

BAJERL CHEVROLET (774) 436-4711 NOUTE A THE ACTION IS DAN NO. . GONGERY 11







CIES34660K

PREDUCTION DATE

T20851

	, DERVILE ROURS:)	NUMBER OF THE PROPERTY OF THE	<u>30 թ.m. Բ</u> ԲԱ7:330 ա.m ֆ.ֆ.ֆ	p.m. SAT 8:00 a.m), -3-000 p.m.
CUSTOVERNO		ADVENDA		TAG RO.	ewolch OFTE
-		LANCHAEL PUE	USING 1383	761	12/09/117
		L	!	7188	LT PEWTER N
		PERFENDENCE PARTY			DELIVERY DATE
		DZICHEVROLE	T TRUCK/TRAILBLAZER/	RAL	05/21/02 SELVE CALD NO
		1	\$2261157 <u>97</u>		SETT MED CATACOM NO.
GLENSHAW, PA		F. T E NO.	P a. Ho		M. O. DATE
HESIDENCE PHONE	BUSINESS PHICKE	COMMENTS			12/09/02
. <u> </u>					
					1.1.
UABOR & PARTS	FLECTRICAL	HOURS: 1.20 TECHES	3:1095	MARRANTY	ALL NEW
CISTO	ER STATES; MIPERS 1900	AGAIN		manufact (REBUILT
HATE PE	MER TO TERM A HAD LIGHT	TO HEEH POSITION	COMECTORS		RANTEEC
(OK) K	ELECTRICAL BER STATES: MIDERS INCO D OPERATION OF WIPER M MER TO TERM A HAD LIGHT O DAMAGE STEP 11 REPU RS GDING BAD, UNABLE TO TOM CAUSING SHORT, REPU	ACE HOTOR LOOKED !	OR CAUSE OF		12,000 MII
INTRUS	TON CAUSING SHORT, REPL	ACED WITPER HOTOR	THE PRICE		COMES F
PARTS PARTS FP	- MANGER	ESCRIPTION			
308 # 1 1	12487687 P	CIEULE 16.064	JOB # 1 TOTAL PARTS	WARRANCY	
	·			0.De	1
			TUTAL LABOR & PARTS	0.50	(449)/
SIEZETPOM	VEND 100%-INV.DATE-0 12/09/02 1	ESCRIPTION			Appro
TOD & 1 MAGE	1279702.1	UNT NENIAL	TOTAL - SUBLET	WARRANTY 0.00	Auto R
TOTAL5	********				
**********					<u> </u>
+ CASH () CHECK (TOTAL LABOR	0.08 0.00	BAIERLC
* VISA/NC () DI	rscower () *		TOTAL SUBLET. TOTAL 6.0.6 TOTAL HISC CHE. TOTAL HISC DISC	0.60 0.00	1. Certifie
•	•		TOTAL MISC CHE.	0.00	
MER EXP () CI	*****		TUTAL TAX	0.00 0.00	2. Early (
THANK YOU FOR YOUR F	MATROMAGE 11111		TOTAL INVOICE \$	0.00	3. Med. [
			MINE THIOTIES	4.50	4. North
HAVE A LIMITE	B PARTS INDICATED BY "	-			5. Compt
					l 6 Discou

NEW OR FACTORY JILT PARTS ARE GUA-FEED 12 MONTHS OR O MILES, WHICHEVER ES FIRST.

pproved uto Repair



AL CONVENIENCES:

- ertified Technicians
- arly Drop Off
- led. Duty Truck Shop
- orth Hills Shuttle
- omplete Body Shop
- Discount Rentals
- 7. 29 Min. Quick Lube
- 8. Genuine GM Parts
- 9. Saturday Hours
- 10. We Service Most GM Cars & Trucks

IMPORTANT

YOU MAY INICHYE A QUESTIONNAINE FROM CHEVROLET MOTOR TRANSION IN THE NEXT FEW DAYS IF FOR ANY REASON YOU GANHOT GRADE US AS "COMPLETELY SATISPED" PLEASE CALL JAY BARNE SERVICE ADMINISTRATOR.

THANK YOU. (FBH) 925-2741 YOUR SATISFICTION IS OUR NO. - SENDENDIZ

PAGE 1 OF 1

CUSTOMER STEMATURE

CUSTOMER COPY

[END OF INVOICE]

			_							FOUN AU	II DV BI	(1 G.M. N. No. 2127-00 oc	
2			1	DOT Auto	Safety Hot	tiine			F	OR AGENCY USE ON			
U.S. Departme of Transportable	•	Veh	ici To	Report Vel	r's Ques	ty Def	naire fects		Date Re	sceived	Res	pository 🗌	
Mational High					-DASH-2-D 8-327-423				12	2-MAR-2003	R.€	eference No.	
Traffic Safety		INT	'B		nhtsa.dot.c		entline		1		1	0010324	
Administratio						JO.,			.]		-	Par Market 7	
Mame	0	WHER INFOR	<u>IMA</u>	ITION(Type	or Print)				Daytime	Telephone Number	E-m	ed Address	
Address			<u> </u>						┨ .				
CETY PENNTN	GTON (GAP		State	VA Z	lp Code	 -		Evening	Telephone Number			
In the absence of	Do you authorize MHTSA to provide a copy of this report to the manufacturer of you In the absence of an authorization, NHTSA WILL NOT provide your name or address								hicle? the vehicle	YES C) NO	 I	
Signature of Own								Date					
							NOTTAM						
17 digit Vehicle Ident		Mumber Locati	ed et	: bottom of wire	dehield on drive	a's skie				Model		Model Year	
1GNET165526122	.730	а сн				CHEVROU	EŤ		TRAILBLAZER		2002		
Oate Purchas 10-AUG-02		Dealer's Name and Telephone Number							Engine: No: Cylinders <u>6</u>	<u> </u>	Fuel Type: Gas		
Original Owne	ir	Dealer's City					State	<u>l'</u>	Code				
Transmission Type	X A	ntilock Brakes	P	² owertrain		1		•	nent Code				
AUTOMATIC	13	ruise Control	4	WHEEL DRIV	Æ	1				DSH(ELD WIPER/WA	SHEX	L:MOTOR	
	Multiple Fallure: 4												
FAILED COMPONENT(8)/PART(S) INFORMATION													
Incident Date(s) 15-JAN-2003		ire Mileage 17400	ra:	ilure Speed									
		ADDI	TO	NAL ITEMS 7	O BE COMP	LETED	WHENRE	PORT	DIS A TI	RE FAILURE	_	 -	
Tire Make		 -	,		(Name or Nur					re Size (Example P21	5/65	R15)	
DOT No. (Example:		(L9ABC036)		Orlgin	nal Equipment Repair		Failure Loc	cation	:		_		
The Component Cod	e								Tire Palure Type				
		ADDITION	AL 7	ITEMS TO 8	E COMPLET!	D WH	EN REPOR	TINE		SEAT FAILURE	_		
Make:			_		Date Manufa	actured	1:		<u>Mo</u> del No		\equiv		
Seat Type:					Installation S	vstem	Ξ						
Child Seat Compone	ALC COC	&: 		Failed Part:	PLICABLE IN	-Att by make		-==					
<u> </u>			6	Arr <u>Please describe</u>	h detail the inc	cidenes)	r In-Orda , Falure(s), (ATIO: Same	N 5), and biju	tvřest)			
Crash	Fire				sons Injured		mber of Dea		_	ted to Police			
Yes (X) No Narrative Descript: Please describe (1)	los of D	es X No Incident(S), C Is leading up 1	rest	n(es), and int	Jury (les).		0			N us done to correct t			
i.a, parts repaired o	отгары	aced (and If o	d bk	ert b sveliek	ıle).								
WINDSHIELD WIPE WITHOUT REMEDY DURING HEAVY RA	Y EXCEP	PT FOR SHOR	IT PE	ERIODS OF TI	IME. THE WIP	PERS AL	CTIVATE W	VHEN E	EVER THEY	CED MOTOR AND TH Y FEEL LIKE IT AND I JB	E ENT FAIL	TIRE WIPER UNIT TO ACTIVATE	
										•			

Include. If available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SINETS IN NECESSARY

The Privacy Act of 1974- Public Line 53-579 This information is requested pursuant to authority vasted in the fational lighway Traffic Safety Act and subsequent amendments. You are under no obligation to responsibilities with a representative and to assist the phirst in determining whether a Monafacturer should take appropriate action to correct a safety defect. If the MHTSA processes with administrative enforcement or highest phirst a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

								_		Room Ave	revedi (M.B. No. 2123	
			D	QT Auto S	afety	Hotline			FC	R AGENCY USE ON	LY 2	54	
U.S. Department of Transportational High Traffic Safet:	lon IWZY	Т	o R	e Owner eport Veh 1-888-D (1-888-	icie Ši IASH- -327-	afety Def 2-DOT 4236)	ects ,		Date Received 20-JUN-2002			Reference No.	
Administrati	оп			ET:www.nl			othne				/00	021	
	. 04	VINER INFOR	MAT	тюм (туре	or Prir	ıt)			Daytime	Telephone Number	E-mal	Address	
Address								\dashv		·			
SCITUA	TF.	·		State	MA	Zip Code		\neg	Evening	Telephone Number	١.		
Do you authorize In the absence of Signature of Ove	f an aut	to provide a horization, H	сор Н Т 5	y of this repo	ort to to provid	he manufac la your nam	turer of yo	ur veh ss to th Date	e vehide	YF5 E	NO	•,-	
and the second					VEH	ICLE INFOR	HOTTON						
1,7 digit Vehicle Iden 1GNDT13S62212		Number Locate	d et i	bottom of winds	shield or	n driver's side	Make CHEVROL	ĘΓ		Model TRAJEBLAZER		Model Year 2002	
Date Purcha: 11-OCT-01			Dealer's Name and Telephone Number					late o	Engine: No: Cylinders Zip Cade			Fuel Type: Ges	
Original Own	er :	Dealer's City State					3446	240	002	<u> </u>			
ransmission Type	X A	untilock Brakes Powertrain Vehicle Con								: Stem: Ngnjtion: Mo	OURE		
	XC	uise Control	41	WHEEL DRIVE			Multiple J			3(0)13(1)11(1)	-		
					D COM	PONENT(S)/PART(S) INFO	RMATIC	ON .			
ncident Data(s) 8-OCT-2001	Fallu	ne Mileage	Fall	ure Speed 45									
		ADDIT	ION				WHENRE	PORT		RE PAILURE	_		
re Make				Tire Model (re Size (Example P2)	15/65R	15)	
OT No. (Example:	DOTM	(L9ABC036)		Origina Prior R	al Equip Lepair	ement .	Fallure Lo	cation:	l				
re Component Co	Тe			_						e Failure Type			
		ADDITION	ALI		_			$\overline{}$		SEAY FAILURE			
ake: eat Type:					P\$ · ·	anufactured itlori System		1	Model No	./Name:			
hiki Seat Compon	ent Cod	a:		Failed Part:									
				APP lease desgibe		HE INCIDEN				ev@set i			
Crash	Fire			amber of Pers			mber of De			ted to Police		····	
Yes X No Invative Descrip Vease describe ()	tion of E	اجت ومالمعا ع	to 🖽	ve fallure, (2)	fallura) and keeps	нцивпсец	, =nd (3	3) what v	N ms done to correct	the fet	kre;	
e, parta repaired VEHICLE IS EXPE MOVE ON 175 OW REPLACED 5 TIM	RIENCIN IN WHIL	IG VARIOUS E	LEC	TRICAL PROF	BLEMS S	SUCH AS IN ER STAY SE	TERMITTEN TAND MOV	T OPE	RATION (OF THE WIPERS, EU WHEN DRIVING. CO	ECTRIC MPLITE	SEATS THA R MODULE	

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY
The Privacy Act of 2974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent are community, you are wader no obligation to request this question him. Your response may be used to exact the NATSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NATSA proceeds with administrative enforcement or Rightien against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

786021

From: To: feedbeck@cartalk.com Alberto <NHTSA> Jimenez

Date:

6/20/02 3:08PM

Subject:

Car Talk VOQ submission

- * This date was submitted via a fill-in form at the Cartalk web site
- (http://www.cartalk.cars.com/Tools/nhtsa.pl) If you have any problems
- * or suggestions regarding the format of this submission, send email

* to webmaster@cartalk.com

SUBMISSION DATE: Thursday, June 20th 2002 et 3:07:37 PM

VECHICLE OWNER'S QUESTIONNAIRE

OWNER INFORMATION

NAME:

ADDRESS:

TELEPHÔNE:

NHTSA authorized to send a copy of this report to the manufacturer. Yes

VEHICLE INFORMATION

VIN: 1GNOT13S822128530

MAKE: chevrolet MODEL: trail blazer itz

YEAR: 2002

ODOMETER: 6200 PURCHASE DATE: 10/11/01

NEW OR USED:

DEALER NAME: Quirk chevroletigeo ADDRESS: Braintres, ma 02185

ENGINE SIZE: CYLINDERS: 8

FUEL INJECTION: Yes TURBO: No FUEL TYPE:

ANTILOCK BRAKES: Yes CRUISE CONTROL: Yes DRIVETRAIN: 4 Wheel DRIVER AIRBAG: Yes PASSENGER AIRBAG: Yes 3-POINT BELT: Yes MOTOR BELT: No 2-POINT BELT: Yes BODY STYLE: Other

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: computer that controls wipers (they worked when they wanted to, at random), electric seats never stayed where set and seat would move on it's own while driving), electric micrors, (never stayed set and would move randomly when driving an when shut off), engagement of 4wd low gear would happen randomly while driving, also front end alignment never done at factory resulting in tires going bald on outside edges and went into a spin in rain , also drivetrain failure resulting in cer jumping into reverse when started, panel that holds control buttons on driver's door feit out hanging by wires

PART NAME(S): computer module replaced 5times, drivetrain fixed 1 time, front aligned 1 time

LOCATION: Right Front

NUMBER OF FAILURES: 4 computer, I drivetrain, 1 alignament, 4 recalls done with code numbers unknown reason given to me

DATE(S) OF FAILURES: 10/18/01,10/20/01,10/24/0112/04/01,12/14/01,02/05/02,04/12/02,05/22/02

MILEAGE AT FAILURE(S): 186,306,1319,1511,2308,2600,4820,5172

SPEED AT FAILURE(S): all speeds, except spin was at 45mph

MANUFATURER CONTACTED: Yes

NHTSA CONTACTED: No

APPLICABLE ACCIDENT INFORMATION

ACCIDENT: No FIRE: No

NUMBER OF PERSONS INJURED: NUMBER OF FATALITIES: ESTIMATED PROPERTY DAMAGE: \$

DRIVER AIRBAG DEPLOYED: N/A
PASSENGER AIRBAG DEPLOYED: N/A

REPORTED TO POLICE: No

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

DOT NUMBER: DOT TIRE MANUFACTURER: TIRE NAME: TIRE SIZE:

ADDITIONAL COMMENTS

most of the "repaire" on the car were done at Quirk chevrolet where we bought the car....please note that when we took delivery of car and brought it home, my husband checked the tires and found only 16 (sixteen) ths, of pressure in all 4 tires. Each time we brought the car in for repairs it was kept for 4 to 15 days at a time, and the defects they ctained to have repaired were still evident on our drive home or would manifest within 2-3 days....i complained each time I brought the car in that the front end felt funny and pulled slightly...they said each time thy could not reproduce the problem (hence the baiding tires and alignment problem they chose to ignore),, we brought the car to a different dealer (Best chevrolet in Hingham, Ma) where all the repairs that Quirk had supposedly done were done again, as well as the front end being taken care of...at this time the car is behaving itself since Best worked on it. In the meanwhile, we opened a file with Chevrolet corp. to negotiate a swap for a replacement car as I am frightened of driving It and all the mechanics that have worked on it as well as myself believe it is a lemon. Chavrolet refuses to replace the car and keeps insisting we give them. enough chances to repair the car...in Massachusetts there is a lemon law that clearly indicates our car is a lemon, but to go that route requires a lawyer with hefty legal fees which we cannot pursue at this time. Also, Quirk performed 4 recall repairs to car but never told us what the recalls were for, except for the transfer case recall. I hope this report can save someone the aggravation we have gone through, and letitl have the car.

END OF FORM

1 continue			· · · · · · · · · · · · · · · · - ·						COLIN DO FRID. 2	.127-000-0
			Auto Safety Hotlin	·	R AGENCY USE	ONLY	254			
U.S. Department of Transportation National High Traffic Safety Administration	in Iway	NATE DC ME	Owner's Que ONWIDE 1-800-424 TRO AREA (202) 3 T: http://www.nhts	1-9393 66-0123	'- 	Date Received Dd_or rt_dt				
[-	OWNER INFO	OITAMO	N (Type or Print)			1		Refe	гепсе Мо).
<u> </u>	O THE LANGE OF THE	- KIMITI I O			_	788021			3021	
[[Vork V	Number			
SCITUATE			MA			Нотть	Number			
In the absence of	an authorization	de a copy s, NHTSA	of report to the menus WILL NOT provide you	factulier of your w ir name and addre	ebilo ee i	ie; o the v		MO Mer.		
Signature of Own	••r		· · · · · · · · · · · · · · · · · · ·	·		·		<u>-/-</u>		
William Provide				INFORMATION						
Vehicle Ident. No. ((Marv.) (Lecaled at i		Vehicle Make 	Vchicle Model		. !	Versicle Year	Curre	n i Odom e	ter Readin
1GNDT13S62	2128530		CHEVROLET TRI	UCTRAILBLAZ	ER		2002	<u>L</u>		
Purchase Det							Engine Size			rbo
11-OCT-200	Dealer's I	Name		 -		- [(CID/CC/L A	CYL	G	
□ New X⊔se			State	Zip Code		_	No Cylinders _		Fu	ol injectio
Trensmission Type	Antilock Brekes	Restraint S	ystem	Cruise Contro	Drive	Tral	Vehicle Type		Body 8	•
☐ Menusi		3-Point	Belt Motorbett		R	Front Rear	lFTvan Fin	Sport Uit (ruck	lippir 4⊸1	Door
Autometic	□ No	_	ngersida Airbag	"│ ┌∾ │	K	4-Who		Actorcyc ———	ắ다.	ettonwagon ek Up Truck
			Microsop was bad	_1			~		ᄪᅄ	her
		F	AILED COMPONE	NT(S)/PART(S)	INI	FORM	ATION			
Component 08540000	Part Name(s ELECTRICAL S	YSTEM:K	INITION:ELECTRONIC	CONTROL UNIT		Location Falled Parits Left Right Crighal Front Rear Replacement				ent .
No of Fallure	Dete(s) of Fallur	0(3)	18-OC	T-2001	_ <u>-</u>		Feiled	NHTS		╧
4	Misage at Fallur	e(s	11	86			Pari(s)	Previo	,	J
	Vehicle Speed at	t Fallure(s)	·				Ti∐Yee ∏N∘	' □	/es 🗀	No
	(Please des	cribe in de	APPLICATIO tall the incident(s), Fallu	ON INCIDENT I re(s), Cresh(es), e	NF(ORM/ Pry(is:	ATION s) on the back of th	ls form)		
Cresh	Fire	Numb	er of Persons Injured	Number of Fatali	е	Es	dimated Property D	жилад	Reported	to Polic
 	Tes Z	اسا				1				
	<u>l</u>	·								X No
	NA	RRATIVE	EDESCRIPTION O	F FAILURE(S),	1NK	CIDE	NT(S), INJURY	(IES)		
THE WIPERS,	ELECTRIC S	EATS TI	OUS ELECTRICAL HAT MOVE ON ITS WHEN DRIVING.	OWN WHILE	DR	MING	. ELECTRIC N	MRRO	RS NEV	N OF ÆR

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 this questionnains. 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.

Lam	 	. 2127-000B
	 	. 2127-UUIH

U.S. Department

of Transportation National Highway **DOT Auto Safety Hotline**

Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT

ate Received	Repository [J
--------------	--------------	---

FOR AGENCY USE OF	NLY 100148	

LIVIIIIANG	~444	
Defects		

10-min-2003

Traffic Safety Administratio		INT		(1-888-) www.nh			otline			P-3-014-2003	I .	1338
	OY	YNER INFOR	MATIO	N(Type t	ar <u>Print</u> i)			S. Dai	- 1 1 - 1 - 1 - 1 - 1		
Marrie								[Daytime	Telephone Number	E-mas:	Address
Address												
W. COLU				State s		Zip Cod		L	· -	Telephone Number	· 	
Do you authorize In the absence of Signature of Own	fan aut	, to provide i horization, i	a copy of VHTSA V	i this repo VILL NOT :	rt to the provide	menufac your nam	tures of yo e or addres	our vehices to the Date,	e vehici	YES X manufacturer.	NO	
					VEHIK	LE INFO	MOTTAM	···				
17 digit Vehicla Identi 1GNES165526110		Number Locate	ed at bott	om of windsi	hleid on di	ive's side	Make CHEVROL	F		Model TRAILBLAZER	_ I -	4odel Year 2002
Date Purchas 08-MAY-02	ed	Dealer's Nar LOVE CHEV								Engine: No: Cylinders	\neg	Fuel Type: Gas
Original Owne	r	Dealer's City W. COLUM					State SC	Zip Ca 2903:	ode 3			
Transmission Type		ntilock Brakes ruise Control	Power	rtrain		_	Vehicle C 236000 V	VISTAILT	TY:WIN	: DSHIELD WIPER/WA	SHER	
	┸		Щ									
Incident Date(s) 07-JUN-2003	Fallur	re Mileage	Failura	FAILES Speed	COMP	THENT (S)/PART(8)) 104F04	RMATI	ON		
		ADDET	TONAL	TIBMS TO	BE CO	APLETED	WHEN RE	PORTU	MS A T	RE FAILURE		
Tre Maka				ira Model (A						re Size (Example P21	5/65R1!	5}
DOT No. (Example:		L9ABC036)		Original Prior Re	l Equipme epair	ent	Fallure Lo	cation:				
The Component Cod	.e									e Failure Type		
		ADDITION	ALITE	45 TO BE	COMPL	ETED WH	EN REPOR	TING A	CHIL	SEAT FAILURE		
Make:						Mactured		. [1	<u> 10del N</u>	./Name:		
Seat Type:					oi feil estan	n System	<u> </u>					
Child Seat Compane	nt Coo	<u>e:</u>	Faite	ed Part:	i-							···
			Picas				H INFORM L Faltereist (vv@asl)		
Crash ☐Yes (X)No	Fire ☐ Ye	≃s IXINo	Numbe	er of Perso	ons Inlum		mber of De			tred to Police N		•
Newative Descripti	ion of D) event	ncklent(\$), C is leading up	to the fa	allure, (2) f	failure en	nd its con	i Bigul à heàs,	, and (3)) what t	ses done to correct	the toll u	rej
WINDSHIELD WIPS DOES NOT GURAN REQUIRED TO DRI	ERS FAI THE TH	IL TO WORK, IAT IT HAS PERING RAIN.	, THIS H ERMANEI DRIVER I	AS OCCUR NTLY FIXE DOES NOT	RRED 4 T. D THE PR	ROBLEM. Of the Pr	THIS IS A ! ROBLEM UN	SAFETY TIL TYR	ISSUE :	REPLACED THE MOT IN THAT WINDSHIEL USE THE WIPERS. SAFELY PULL OFF TH	D WIPE DURING	RS ARE HEAVY

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY The Privacy Act of 1974-Public Law 93-579 This information is requested personnt to suthority vested in the Mational Highway Traffic Safety Act and animospheric amendments. You are under no obligation to respond this questionnaire. Your responds may be used to assist the MitSA in determining whether a Pennisheruner about the appropriate action to correct a unisty defect. If the MitSA proceeds with administrative enforcement or Riggetton against a remulacturer, your response, or a statistical animary thereof, may be used in support of the agency's action.

DOT Auto Safety Hotiine

FOR AGENCY USE ON	LY 100148
Date Received	Repository 🗌
31-DEC-2002	Reference No.

U.S. Departmen				Owner Port Yeh	ilcle Safe	ety Pef			Date Re	ceived	Repo	ository 🗌
Mational High Traffic Safety Administratio	TWEIY Y	INT	ERNE		DASH-2-1 -327-42 htsa.dot	36)	otlne		31	-DEC-2002		erence No. 100437
		WNER INFOR	TAME	ION (Type	or Print)						<u> </u>	
Mame		11=10=1=1							Daytime	Talaphone Number	E-mai	Address
Address									Granica	Telephone Number	•	
LAWREN	···-				GA .	Zip Code		÷				
Do you authorize In the absence of Signature of Own	f an But) to provide : thorization, f	a copy VHTSA	of this rep WILL NOT	ort to the a provide y	manufac our nam	turer of you e or addres	or vali s to ti Date	he vahicle	□ YES manufacturer. _/	ON,	
	-				VEHICO	E LINFOR	RMATEON					
17 digit Vehicle Identi 1GNES16S526112		Number Locate	ed at bo	attem of Wind	ishleki on dri	wer's skite	Make CHEVROLI	ET		Model TRAILBLAZER		Model Year 2002
Date Purchas 30-MAY-02		Dealer's No	me and	d Telephone	Number					Engine: No: Cylinders 6		Fuel Type: Gas
Original Owne	 ;r	Dealer's City	y				State	ZIp (ade	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Transmission Type AUTOMATIC		ntilock Brakes ruise Control	Í	vertrain AR WHEEL D	RIVE		├──-	TSIET	JTY:WIN	DSHIELD WIPER/WA	SHER;	MOTOR
	<u> </u>		<u> </u>				Multiple F					
					D COMPO	JNENT(S)/PART(S)	INFO	RMATIC	Ж		
Incident Date(s) 05-NOV-2002	Fallur	re Mileage 9500	Paur	re Speed 55								
	_	ADÖL		LITEMS T			WHENRE	ORT.		RE FAILURE 'e Size (Example P21	= 46ED	
Tire Make DOT No. (Example:	DOTAL.	ALGABOTISAT			al Equipme		1_, ,	7.		E ;att (crawbs: ⊾c)	77/021	15)
Tire Component Cor				Prior R	tepair		Pailure Lox	.abon				····
		ADDITION	# T	EMS TO B	COM DI E	TEN WK	ITU DEDNE	TING		e Fallure Type SEAT FAILURE		······································
Make:		ADDITION	ML III		Date Manu			12172	Model No	•• ••		
Seat Type:					Installation	n System	ĸ					
Child Seat Compone	ent Cod	e:	Fa	alled Part:							_	
			<i>Oh</i>	race describe	in detail the	inddentfs.	(TINFORM)), Falking(k), C	resh(e		rv(les).)		
Crash Yes XINo				mber of Pers		ed Nau	imber of Dea	ths	Repor	ted to Police N		
Normative Descript Please describe (1 Le, parts repaired	l) event	ts teading up	to the	feiture, (2)	In Hure on	d Ite con	soquences,	end (3) West u	nes done to correct	the fal	lure;
THE WIPER MOTO INOPERABLE, SEC TURNED ON BY TH DRIED OUT.	or assi Cond F/ Hemsely	XEMBLY SNAPI AILURE WAS VES AFTER C	PED WAS WIPER CAR WA	PHERE THE M R MOTOR D ASH BUT CO	MOTOR CO RJE TO WA DULDN'T BE	ATER INTI ETURNEI	RUSION. THE	HE WI	PER FAILI RS WORI	ING THE WINDSHIE ED TO OPERATE OU KED PROPERLY AFT	ring P	rain, also Wiper Motor
Include, F availab												TS IF NECESSARY
The Priviley Act of 197 Amendments, You are												

about take appropriets enter to correct a safety defect. If the NTSA proceds with administrative extended or litigation against a manufacturar, your response, or a statistical assumbly thereof, may be used in support of the ogency's action.

										lore Are	roved:	O.M.S. No. 1127-00008
8				DOT Auto S	afety I	Hotline			FC	OR AGENCY USE ONL		100148
U.S. Departme of Transportab		Veh	icle	e Owner' Report Yehi	's Que	estion fety Def	nnaire fects	-	Date Rec	zived	Repo	asitory 🗌
Mational High Traffic Safety Administratio	kway Y	INT	ERN	1-888-D (1-868- VET xwww.nh	-327-42	236)	not lin e		27-	- f68-200 3		feranca No. 008175
, , , , , , , , , , , , , , , , , , , ,		NNER INFOR	DŁĄ.	тхом (тура с	or Print	<u>.</u>					<u></u>	
Name									Daytime	Telephone Number	E-mai	§ Address
Address					_				Franka *	Talanhana Murih ar	1	
	NCEVILL		_	State (Zip Code				Telephone Number		
Do you authorize In the absence of Signature of Own	if an auti	to provide i horization, f	i cop IHTS	ly of this repo IA WILL NOT	et to the provide	a manufac your nam	turer of you le or addres	our vehi ess to th Date	he vehicle	₩ YES manufacturer.	3 NO	
			_		VBHI/	CLE DATO	RMATION					
17 digit Vehicle Ident	tifics tion	Number Local	ed et	bottom of winds	-					Model		Model Year
1GNE516552 6 112		·					CHEVROL	ET		TRAILBLAZER		2002
Date Purchas 30-MAY-02		NASH CHEV	VROL	nd Telephone LET (770) 963-						Engline: No: Cylinders <u>6</u>		Fuel Type: Gas
Original Owner Dealer's City State Zip Code K LAWRENCEVILLE GA 30045												
Transmission Type	1_	ntilock Grakes	l	owertre/n				•	nent Code	SHIELD WIPER/WA	SHER	-MOTOR
AUTOMATIC	⊠ C⊓	ruișe Control	RE	EAR WHEEL DE	RIVE		Multiple F					
		· · · · · · · · · · · · · · · · · · ·	_		о соме	ONNINT (S)/PART(8)) INFO	RMATIO	H	_	
Inddent Oate(s) 26-FE8-2003	,	re Mileage 16775	Fall	lure Speed 5	<u> </u>							
		AppI	TON	AL ITEMS TO				PORTI				
Tre Make				Tire Model (1	Name or	r Number)				e Size (Example P21	5/65R	.15)
DOT No. (Example:		L9ABC036)		Original Prior Re	i Equipm epair	ent	Faiture 1:x	cation:	:			
The Component Co	de									Falure Type		
Make:		ADDITION	<u> </u>					_		SEAT FAILURE		_
Make: Seat Type:						nufactured Ion System			Model No.	/Name:		-
Child Seat Compore	ent Cod	e:	\exists	Failed Part:		<u></u>						
			· 4	APPL	ICABLE	INCIDE	NT INFORMA	ATTO	A	-4		
Crash	Fire		Nt.	Please des<i>alka In</i> umber of Perso	ors Iniu	red Nu	it Fathe(s). C Imber of Dea		Reporte	ed to Police		
Yes X No	∐TYe	×S X No	h	1 Spring	/				Щ'	<u>N</u>		
Please describe (1) Le, parts repaired	or repla	is leading up aced (and if a	to the	ne fallure, (2) (art is available	feliure Br	ind its con				es dans to correct t		<u> </u>
	NCE, THE	E WIPERS W	OULD	D ACTIVATE AI	AFTER GO	DING THRO	OUGH AN AL	LITOMA	ATED CAR	OR HAYING TO BE R WASH, AND WOUL		

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHFFTS IF NECESSARY
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the Mitional Highway Traffic Selety Act and subsequent amendments. You are under no obligation to respond this questionality. Your response may be used to assist the NHTSA in determining whether a Manufacturar about take appropriate action to correct a selety detact. If the MITEA proceeds with administrative enforcement or Fitigation against a manufacturar, your response, or a statistical summary thereof, may be used in support of the agency's action.

DOT Auto Safety Hothine Comment									Form App	roved	<u>an.l.n. 2127</u>
To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) Traffice Safety Administration OWNER INFORMATION (Type or Print) Name Address Owner Information (Type or Print) Name Address Owner Information (Type or Print) Owner Information (Type or Pr	2			DOT Auto	Safety Ho	Hine		FC			
Name								Date Re	celved	Rep	ository 🗌
Traffic Sefaty Administration INTERNET INFORMATION (Type or Print) Name OWNER INFORMATION (Type or Print) Owner InFORMATION In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Owner InFORMATION It dig tunks for Information number Located at bottom of whichheld on driver's cide (TheVROLET INFORMATION) It dig tunks for Information number Located at bottom of whichheld on driver's cide (TheVROLET INFORMATION) Date Purchased Original Owner Information Number Located at bottom of whichheld on driver's cide (TheVROLET INFORMATION) Date Purchased Design of Number Information Number Information Number Information Number Information In				1-888	DASH-2-D	χÓΤ		<u>ہ</u> ا	-MAY-2002	Pot	
Commission Com	Traffic Sefet	y	TMTER	•		-	ect Ena	"	-PIA 1-2003	•	
Name Address Deptime Telephone Number E-mail Address	Administrati									-~	/1/00G
Address City LAWRENCEVILLE State GA Zip Code Evening Telephone Number Do you authorize HITSA to provide a copy of this report to the manufacturer of your vehicle?	Nama	OWNER	INFORM	ATION (Type	or Print)			Daytime	Telephone Number	E-ma	Address
Do you authorize HITSA to provide a copy of this report to the manufacturer of your vehicle?								1	-		
In the absence of an authorization, NINTSA WILL NOT provide your name or address to the vehicle manufecturer. Date D	City LAWRE	NCEVILLE		State	GA Z	lp Cod	e :	Evening	Telephone Number	1	
VEHICLE INFORMATION 17 digit lichide identification Number Located et bottom of windshield on differ's sale Marke CHEVROLET TRAILBLAZER 2002 16NES16SS26112671	In the absence of	f an authoriz	rovide a c adon, NH	copy of this rep TSA WILL NO	oort to the m I provide yo	anufec ur nam	e or address to t	he vehich	YES C	NO	
17 digit Vehicle (dentification Number Located et bottom of whickhield on driver's side Marke CHEVROLET TRAILBIAZER 2002	0/3/12/07 07 07/1				VERICU	THE	•				
CHEVROLET TRAILBAZER 2002	37 digit Vehide Iden	tification Numbe	er Located (at bottom of win			7		Model	-	Model Year
NaSH CHEWROLET 770-963-9266 No: Cylinders 5 Res Original Owner Dealer's City LAWRENVECTUE State Zip Code 30045 30045 State 20045 Sta	1GNES16S526112	2671					CHEVROLET			ĺ	
Transmission Type AUTOMATIC Cruise Control REAR WHEEL ORIVE FAILED COMPONENT(S) / PART(E) INFORMATION FAILED COMPONENT(S) / PART(E) INFORMATION FAILED COMPONENT(S) / PART(E) INFORMATION The Size (Example P215/6SR15) OT No. (Example: DOTMALGABCG36) Original Equipment Prior Repair Failure Location: The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE Take: Prior Repair Tre Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE Take: Pailure Type: Installation Systems APPLICABLE INCIDENT INFORMATION (Please describe in febral the hosbert(s) Failure). Crash(es) and inturvies) Number of Persons inlured Number of Deaths Reported to Police Number of Deaths Reported to Police Number of Deaths Reported to Police Number of Deaths REAR WHEEL ORIVE 136000 VISIBILITY; WINDSHIELD WIPER/WASHER 136000 VISIBILITY; WINDSHIELD WIPER/	30-MAY-02	NAS	H CHEVRO	and Telephon OLET 770-963-	e Number 9266						•
AUTOMATIC Cruise Control REAR WHEEL ORIVE 136000 VISIBILITY:WINDSHIELD WIPER/WASHER Multiple Failure: 3			_,,_,	E			J ,				
Multiple Faiture: 3	Fransmission Type	X Antibock	Brukes	Powertrain					,		
Pailure Mileage Pailure Speed	AUTOMATIC	Z Cruise C	antrol 1	REAR WHEEL (DRIVE				SHIELD WIPER/WA	SHER	<u> </u>
Incident Date(s) Component Code Failure Misage Failure Speed		١.		FÁTU	ED COMPOR	ENT/S	\/DADT(E\THE	BUATT			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE The Make The Model (Name or Number) Tire Size (Example P215/6SR15) OT No. (Example: DOTMAL9ABC036) Original Equipment Prior Repair The Component Code The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Type The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE The Failure Lucide Type The Failure Lucide Type The Failure Lucide Type The Failure Type The Failu	Incident Date(s)	Failure Mile	age F		1		M-AKILOJ INC	MHAIL			
The Model (Name or Number) Tire Size (Example P215/6SR15) OT No. (Example: DOTMALGABC036) Original Equipment: Prior Repair Failure Location: Tire Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE failes: Date Manufactured: Model No. /Name: eat Type: Installation Systems: Indid Seat Component Code: APPLICABLE INCIDIENT INFORMATION (Plane describe in pigal the incidents), Failure), and injury(les). Tre Size (Example P215/6SR15) Tre Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE Model No. /Name: APPLICABLE INCIDIENT INFORMATION (Plane describe in pigal the incidents), Enables) Tre Failure Type APPLICABLE INCIDIENT INFORMATION (Plane describe in pigal the incidents), Failure), and injury(les). Teams describe (1) events leading up to the failure, (2) failure and its certisequences, and (3) what was done to correct the failure; e, parts repaired or replaced (and if old part is available).	02-MAY-2003	21400	}	65	1						
Tre Model (Name or Number) OT No. (Example: DOTMALSABC036) Original Equipment Prior Repair Tre Failure Location: Tre Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE Take: Date Manufactured: Model No. /Name: eat Type: Installation System: Initial Part: APPLICABLE INCIDENT INFORMATION (Places describe in please the Incidents's). Failure(s). Tre Failure Type Model No. /Name: APPLICABLE INCIDENT INFORMATION (Places describe in please the Incidents's). Failure(s). Tre Failure Type Model No. /Name: APPLICABLE INCIDENT INFORMATION (Places describe in please the Incidents's). Failure(s). Tre Failure Type Model No. /Name: APPLICABLE INCIDENT INFORMATION (Places describe). Applicable in please the Incidents's). Crash(es). No. Tre Failure Type Model No. /Name: Applicable in please the Incidents's). Crash(es). No. Tre Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE Model No. /Name: Applicable in please the Incidents's). Applicable in please			ADDITIO	MAL ITEMS T	O BE COMP	LTE	WHEN REPORT	ING A TI	RE FAILURE		
Prior Repair Prior Repair Tre Fallure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE bike: Date Manufactured: Model No. /Name: Installation System: Indid Seat Component Code: Failed Part: APPLICABLE INCIDENT INFORMATION (Place degree in place the incident's). Failure(). and injury(iss). Trash Fire Number of Persons injured Number of Deaths Reported to Police Number of Persons injured Number of Deaths Reported to Police Type X No Yes X No Number of Incident(5), Crush(sa), and Injury(iss). Teams describe (1) events leading up to the feiture, (2) feiture and its corresquences, and (3) what was done to correct the feiture; e, parts repaired or replaced (and if old part is available).	ire Maka								_	5/65R	15)
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE take: Data Manufactured: Model No. /Name: Installation Systems Installation Systems Installation Systems APPLICABLE INCIDENT INFORMATION (Flows describe in detail the incident(s), Failure(), and injury(iss). Trash Fire Number of Persons Injured Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Installation Systems Number of Deaths Reported to Police Number of Deaths Rep	OT No. (Example:	DOTMALSAB	C036)	Origin	al Equipment Repair	t	Failure Location:	 _:			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE bike: Date Manufactured: Model No. /Name: Installation System: APPLICABLE INCIDENT INFORMATION (Place describe in detail the incident/s). Failure/s. and injury(les). Drash Fire Number of Persons Injured Number of Deaths Reported to Police Number of Persons Injured Number of Deaths Reported to Police Number of Incident(s), Cresh(es), and Injury(les). Teams describe (1) events leading up to the feiture, (2) feiture and its contenquences, and (3) what was done to correct the feiture; e, parts repaired or replaced (and if old part is available).	ire Component Ca	de						Tire	: Fallure Type		
eat Type: Installation System: Inkid Seat Component Code: Failed Part: APPLICABLE INCIDENT INFORMATION (Places describe in detail the incident's), Failant's), Crash(es), and injury flee). Crash Fire Number of Persons Injured Number of Deaths Reported to Police N Number of Deaths Reported to Police N Name of Incident(5), Crash(es), and Injury flee). Salast describe (1) events leading up to the failure, (2) failure and its correspondences, and (3) what was done to correct the failure; e, parts repaired or replaced (and if old part is available).		ADD	ITIONAL	ITEMS TO B	COMPLET	HW GB	EN REPORTING		• •		
hild Seat Component Code: APPLICABLE INCIDENT INFORMATION (Place describe in detail the incident's). Falam(s). Crash(es). and injury (les). Trash Fire Number of Persons Injured Number of Deaths Reported to Police Yes INO Yes X No No No Number of Incident(5), Crash(es), and Injury (les). Tenthire Description of Incident(5), Crash(es), and Injury (les). Tenthire Description of Incident(5), Crash(es), and Injury (les). Tenthire Description of Incident(5), Crash(es), and Injury (les).	take:				Date Manuf	actured		Madel No.	/Name:		
APPLICABLE INCIDENT INFORMATION (Places describe in detail the incident's), Fedunals), Crash(es), and injury(les). Crash First Number of Persons Injured Number of Deaths Reported to Police Yes No Yes No		ant Cador			Insta latio n :	System	<u> </u>				
(Place describe in detail the Incident(s), Crash(es), and Injury(les). Crash First Number of Persons Injured Number of Deaths Reported to Police Yes X No Number of Persons Injury (les). Tarretive Description of Incident(5), Crash(as), and Injury(les). Teams describe (1) events leading up to the fellure, (2) fellure and its contequences, and (3) what was done to correct the fellure; a, parts repaired or replaced (and if old part is available).	mia Seat Compani	ent Code;			TCARLE IN	ran ev	Y THEODILATIO				
TINO Yes X No Notembre 1 No Note	<u></u>			(Plansa describe	in detail the in	oldent/s)	Februaria), Crash(es	L and Info			
Fease describe (1) events leading up to the failure, (2) failure and its correspondences, and (3) what was done to correct the failure; .e., parts repaired or replaced (and if old part is available).	∏Yes 14 No	☐ Yes 🗓	No		<u>. </u>	Nu	mber of Deaths				
WINDSHIELD WIDERS FALLED IN IDING DAINSTOOM EAS THE 30D TIME TO 7 MONTHS 410	Maasa describa (1) tvěnta lezd	ing we to t	the follure, (2)	follure and	ike cent	equences, and (2	J) What w	sa done to correct i	the fall	piet
Associated as consistent and and and the part of the p	WINDSHIELD WIP	ERS FALLED D	JURING RA	AINSTORM FO	R THE 3RD T	IME IN	7 MONTHS.*JB				

Include, if available: Police/Fire Department Report, Phobas, and Reps' Invoice.

ATTACH ADDITIONAL SHRETS IF NECESSARY
The Privacy Act of 1974-Public Law 93-879 This inforination is requested pursuant to authority vested in the National Highway Trains Sunty Act and subsequent amendments. You are under no chiligation to respond this questionnairs, Your response any is used to qualit the HITSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or Rightly against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

U.S. Department

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire To Report Vehicle Safety Defects

FOR AGENCY USE ON	LY 100149
Date Received	Repository [
28-JUL-2003	Reference No.

of Transportation 1-888-DASH-2-DOT National Highway (1-888-327-4236)Traffic Safety INTERNET:www.nhtsa.dot.gov/hotline 10029329 Administration OWNER INFORMATION (Type or Print) Caytime Telephone Number | E-mail Address Name Address Evaning Telephone Number State GA dty Zip Code LAWRENCEVILLE Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? To you section to minimum to provide a copy of this report to the manufacturer of your vehicle? YES

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Classifier of Over---X NO Signature of Owner Date. **YEHICLE INFORMATION** 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side Model Model Year CHEVROLET TRAILBLAZER 2002 1GNES165526112671 Dealer's Name and Telephone Number Date Purchased Engine: Fuel Type: NASH CHEVROLET 770-963-9266 30-MAY-02 No: Cylinders 6 G85 Ovigiral Owner Depler's City Sinte Zip Code 冈 LAWRENVECTILLE GA 30045 Vehicle Component Code Transmission Type X Antilock Stakes **Powertrain** 136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR AUTOMATIC REAR WHEEL DRIVE X Cruise Control Multiple Fallure: 1 FAILED COMPONENT(S)/PART(S) INFORMATION Failure Mileage Incident Date(s) Faikire Speed 25300 27-JUL-2003 <u>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE PAILURE</u> Tire Make The Model (Name or Number) Tire Size (Example P215/65R15) DOT No. (Example: DOTMAL9ABC036) □ Original Equipment □ Prior Repair Failure Location: Tira Component Code Tire Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT PAILLIRE Make: Date Manufacture d: Model No./Name: Seat Type: Installation Systems Child Seat Component Code: Falled Part: APPLICABLE INCIDENT INFORMATION (Please describe in detail the incidentis), Faltantis), Crash(es), and injury fies). Çrash Number of Persons Intured Number of Deaths Reported to Police Fire Yes X No N XINo Harrative Description of Incident(5), Crash(es), and Injury(les). Please describe (1) events leading up to the failure, (2) failure and its corrections, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and field part is available). THE WIPER MOTOR FAILED TO OPERATE AFTER RUNNING THE CAR THROUGH A HIGH PRESSURE CAR WASH. THIS IS THE STH FAILLIRE OF THE WIPER MOTER SINCE NOVEMBER 2002. *AK Include, if available: Police/Fire Department Report, Photos, and Repair Invoke, ATTACH ADDITIONAL SHEETS IF NECESSARY The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the Historial Highway Traffic Safety Act and subsequent

amendments. You are write no chigation to respond this questionnoire. Your response may be used to assist the MITEA in determining whether a Manufacturer should take appropriate action to correct a select defect. If the NITEA proceeds with administrative enforcement or Rigotion against a manufacturer, your response, or a statistical aummary thereof, may be used in support of the agency's action.

									T	- Form App	negeriga.	M.A. No. 2127-0 602
(3)			D	OT Auto	Safet	ty Hotline			FC	OR AGENCY USE ONL	LY 10	0148
U.S. Department of Transportable				teport Ve	hic ie i	Question Safety Def		1	Date Rec	ceived	Rapos	akory 🗌
Mational High						H-2-DÖT 7-4236)		1	22	-1UN-2003	Refer	rence No.
Traffic Sefety Administratio		INT	ERN			dot.gov/h	otlne	1	1	/	1002	3522
	Ö	WNER INFOR	RMAT	TON (Typ	e or Pr	rint)						- ::-
Mime									Daytime	Telephone Number	E-mail A	Address
Address									Sienton	Telephone Number		
City EAST RO) CKAW	/AY	_	State	NY	ZIp Code	• :.		CVBING I	Генерполе попъет		
Do you authorize In the absence of Signature of Own	f en aut	to provide i thorization, i	≜ cop NHTS	y of this re A WILL NO	port to T prov	the manufectide your name	turer of you le or addre	our veh iss to ti Date	the vehicle	☑ YES ☐ manufacturer.	סא [
						HICLE INFO						"
17 digit Vehicle Ident 1GNET165836105		Number Locate	ed at b	ottom of wh	idsblekt (on driver's side	Make CHEVROU	FT		Model TRAILBLAZER	1	fodel Year 2003
Date Purches 23-FEB-03		Cealer's No		nd Telephor	ne Mumi	_	·	Engine: Fuel Type; No: Cylinders <u>6</u> Gas				
Orlgina) Owne												
Transmission Type		ntilock Brakes	1	owertrain	_	-	1	•	nent Code	SHIELD WIPER/WAS	SHER	
AUTOMATIC	N C	ruise Control	4 v	WHEEL ORT	Æ	I	Multiple F					
	<u> </u>		<u></u>	PAI	80 00	MPONENT(S)/PART(S) INF	RMATIC	N		
Incident Date(s) 21-JUN-2003	Failur	re Mileags 3400		lure Speed 20								
		ADDI	ZON/			COMPLETED		PORT				
Tire Make			\Box	1201120		e or Number?			Time	e Size (Example P21)	5/65R15	กิ
DOT No. (Example:		(JGA8C036)		Origi Prior	nal Equi Repair	pment	Failure Los	cation:	<u></u>			
Tire Component Cox	ie									a Fallure Type		
		ADDITION	ALI	NEMS TO	$\overline{}$					SEAT FAILURE		
Make: Seet Type:	—				_	<u>Manufactured</u>			Model No.	./Name:		
Seat Type: Child Seat Compone	ent Car			Falled Part:		lation System	<u></u>				·	
CITAL OCCUPANT	12			AP	PLICAE	BLE INCIDEN	IT INPORM	OLLY	K			
Crash □Yes (XiNo	Fire v	·····································		<i>lease describ</i> Imber of Pe		iniured Nu	imber of Dea		Reports	ny(lest.) ted to Police N		
Mayrative Descripti	ion of II) event	incident(S), C to leading up	to the	e fellure, (2	2) fallur	s). re and its con	sequences,	, and (ms done to correct t	the falls	raj
WINDSHIELD WIPI		•				WNPOLIRIIII	mini •N	LM				<u> </u>

Include, if available: Posce/Fire Department Report, Photos, and Repair Invoke.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-379 This information is requested parament to authority vested in the Pational Highway Traffic Safety Act and subsequent smendments. You are under no obligation to reapond this questionnal in. Your response may be used to assist the NITSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NITSA proceeds with administrative enforcement or Rigation against a manufacturer, your response, or a statistical summary thermal, may be used in support of the agency's action.

			DOT Aut	o Safet	y Hotiin	e -		FO	R AGENCY USE ON	Y 10	0148
D.S. Departme	ent		icle Own	er's Q	uestic	onnaire		Date Red	zewed	Repo	sitory 🗌
of Transportat Mational Hig Traffic Safet Administrati	ion sway y			8-DASH 86-327	-2-DÓT -4236)			27-	- MAY- 2003		rence No. 20552
··	O.	VNER INPOR	MATION (Ty	pe or Pri	int)			Continu	Telephone Number	E-mil	Address
Mame	-	•	_					Layura	TEREPRICIES MUNICES	: :	AUCITES
Address ,								Evenina 1	Telephone Number		
Cliby KINGST	ON		Stat	MH MH	ZIp Co	ode			- Hamba		
Do you authorize In the absence of Signature of Own	f an aut	to provide a thorization, N	copy of this HTSA WILL F	report to IDT provi	the manu de your m	facturer of you ame or addre	our veh ss to th Date	ie vehlcie	₩ YES □ ménylacturer. L	NO	
				VE	ECLE IN	ORMATION					
17 digit Vehicle Ider	tif ication	Number Locate	d at bottom of	Arindshield c	n dilver's s	kle Make			Model	Ti	Model Year
1GKET165X3612	5637					GMC			ENVOY		2003
Date Purcha 06-DEC-02			ne and Teleph 0 603-436-170		Net .				Engine: No: Cylinders <u>6</u>		Fuel Type Gas
Original Own	er	Dealer's City PORTSMOU				State NH	ZIp C 0380				
ransmission Type AUTOMATIC		ntilock Brakes ruise Control	Powertrain 4 WHEELD	RIVE				ent Code ITY:REAR	WINDOW WIPER/	NASHE	ą.
]	BBC CORRIO				Multiple	Falure:	1			
···			FA	ILEO COI	4 PONENT	(\$)/PART(\$) INTO	RMATIO	H		
incident Cate(s) 5-MAY-2003	Failu	re Mileage	Falure Spee 50	4							
		ADOIT	IONAL ITEM	S TO BE	COMPLET	ED WHEN RE	PORT	NG A XX	RE FAILURE		·-
ire Make					or Numbe				e Size (Example P21	5/65R1	5)
OT No. (Example	DOTMA	ALGA8C035)	日常	ginal Equi or Repair	pment	Fallure Lo	cation:				 -
ire Component Co	de							Tire	Failure Type		
		ADDITION	AL ITEMS TO	,			_		SEAT FAILURE		
lake:					danufactu			Madel No.	./Name:		
eat Type: hild Seat Compor	-wh Carl	<u></u>	Enflord Co.		ation Sysb	e 17 c					
um seat compor	ezii, COC	·		PPLICAE		ENT INFORM Us), Fature(s),					
						urci e ameroici i		L AUTO PROPE	WINEL I		
Crash	i Fire		Number of			Number of De			ed to Palice		

I HAVE A 2003 GMC ENVOY XI, WITH LESS THAN 8,000 MILES ON IT. ON MAY 26, 2003 WHILE DRIVING IN THE RAIN, THE FRONT WIPERS QUIT. IN A MATTER OF SECONDS, I COULD SEE NOTHING. MEEDLESS TO SAY, IT WAS A VERY DANGEROUS SITUATION.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This Information is requested pursuent to authority vested in the Mitional Highway Traific Soficty Act and subsequent presented from the Mitional Highway Traific Soficty Act and subsequent presents. You response may be used to assist the MITSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the MITSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in apport of the agency's action.

										Nerm App	TÜVED:	ILM.B. No. 2227-8002
			DC	T Auto :	Safety Ho	tilne			FC	R AGENCY USE ON	LY 1	100148
U.S. Departme of Transportation National High Traffic Safety Administration	on way on	INT	icle ro Re ERNE	Owner port Vel 1-668- (1-888 Twww.n	r's Ques hicle Safe/ DASH-2-D I-327-423 htsa.dot4	stio n ty Def iot i6)	ecta		Date Res	ceived -JUN-2003	Ref	erence No.
	σ	WNER INFOR	MATI	юн (Туре	ar Print)				Davidos	Telephone Number	E-min	i Address
Neme									Sayune.	reepione Nuiva	118	- varieté
Address									Ettenine '	Talephone Number	ļ	
CAPE M/	ΑY			State	NO Z	ip Code	8			PORPLICIE (MILES	ŀ	
Do you authorize In the absence of Signature of Own	an au	to provide i thorization, h	COPY IHTSA	of this rep WILL HOT	part to the m T provide yo	anufac ur nam	turer of ye e or addre	or veh Ss to U Date	ha vehicie	YES	מא [
					VEHICLE	INFO	MATION					
17 digit Vehicle Ident	Meation	Number Locate	ed at bo	etomor wine						Model		Model Year
1GKET16S736132	559						GMC			ENVOY		2003
							<u>L</u>			•		
Date Purches 13-MAY-03	ed	Dealer's Ner KERBECK 6			e Number					Engine: No: Cylinders		Fuel Type: Gas
Original Owne	r	Dealer's City PLEASANTS					State NII	Zlp (iode	-		
Transmission Type	X A	tillock Braissa	Pow	ertrain					ierk Code			
AUTOMATIC	XI o	uise Control	4W	HEEL DRIV	Æ		136200	VISIBI	TTY:WIND	SHIELD WIPER/WA	SHER	MOTOR
							Multiple	Fallure	:			
				FAIL	ED COMPON	entrs	/PART(S) INFO	RMATIO		_	·
Incident Oate(s)	Pajju	ne Mileagé	Failur	re Speed					· · · · ·			· · ·
		ADDIT					WHEN RE	PORT	(NE A TD	RE FAILURE		
Tire Make			Π.	Tire Model	(Name or Nu	ımber)			Tim	5ize (Example P21	5/65R	15)
DOT No. (Example:		(L9ABC036)	士		al Equipment Repair	t	Pallure Lo	catton:	1 :			
The Component Coo	le								Tire	Failure Type		
		ADDITION	ĄLIT	EMS TO B	E COMPLET	ED WH	EN REPOR	TING	A CHILD	SEAT FAILURE		-
Make:		"			Date Manuf	actured	l:		Model No.	/Name:		
Seat Type:					Installation :	System						
Child Seat Compone	nt Cod	<u>e. </u>	FB	Red Part:								
			/Plea		ALICABLE IN In date# the in					ushe))		
Crash □Yes XINo	Fire Type	s XINo			sons Injured		mber of De		Report	ed to Police N		_
Narrative Descripti Please describe (2) i.e. parts repaired o	on of I) event	ncidenk(S), C a leading up i	ta the	failure, (2)) failure and	Her com	tequences,	, and (3	5) what w	as done to correct (the fol	liures
MY 2003 GMC ENV						*NLM						•

Include, if syalable: Police/Fire Department Report, Photos, and Regair Involve.

ATTACH ADDITIONAL SHEETS IF NECESSARY
The Privacy Act of 1974-Public Law 93-879 This information is requested pursuent to auditority visited in the National Highway Traffic Solicty Act and subsequent a mendmenta. You are under no obligation to respond this questionnels. You response they 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 auforcement or Highway against a manufacturer, your response, or a statistical ammains thereof, may be used in support of the agency's action.

		***					$\overline{}$		_	7		APVILLE	11 B.M.R. No. 2127-0010B
			DØ	JT Aut	o Safety	/ Hotil	ine		,	F	OR AGENCY USE ON	ALY	100148
U.S. Department of Transportable	io n		hicle (To Rep	Owne	ler's Qu Vehicle Sa 8-DASH-:	uesti Safaty I	tion Defe		. 1	Date Re		$\overline{}$	pository 🗌
National High Traffic Safety Administratio	y -	IN		(1-88	8-DASH-: 88-327-4 v.nhtsa.d	4236))	iotiline	-	16	6-DEC-2002		eference No. 0000118
·	01	WHER IMPOR	RHATT	ON (Ty	pe or Prir	nt)					- · · · · · · · · · · · · · · · · · · ·	<u>ٺ</u>	
Name		_	-	.,,,			_			Dayona	a Telephone Number	F-B w	Thill defeater-
Address			<u> </u>	Tetal						Evening	Telephone Number	4	
City LAURINI					NC NC		Code			1	TERDINOLE	_	
Do you authorize In the absence of Signature of Own	f an aut	to provide thorization,	a copy i NHTSA	of this r WILL N	apert to th OT provid	he mani 2 your	ulact nami	wrer of you e or addres	our veh es to th Date	the vehicle	Y YES] NO	
· · · · · · · · · · · · · · · · · · ·								RMATION					
17 digit Welfide Ident 1GKES165836118		Number Locate	ed at boo	stors of w	indshield on	di W er's i	såde	Make GNC	•		Model		Model Year 2003
Date Purchase 25-OCT-02 Original Owne		TOBY WELL	US 910-2	Telepho 295-200	one Number 02	#	<u> </u>		·——		Engine: No: Cyfinders 6		Fuel Type: Gas
Original Owner	′ _/	Dealer's City PINEHURS						State NC	2 0 u	Code		_!	
Transmission Type	N A	intilock Brakes	Powr	rentralo						nent Code	_	_	,
AUTOMATIC	I	ruise Control		R WHEEL	L DRIVE		}				DSHLELD WIPER/WA	SHER	:MOTOR
								Mulitiple Fa				-	
						PONEN	IT(8))/PART(S)	INFO	RMATIO	N	_	
Incident Date(s) 04-DEC-2002	Fate	are Mileage 3500	,	re Speed a									
The Make		ADDIT	TONAL	лемя	TO BE CO	MPLE	mp?	WHENRE	ORTI		REFAILURE	7797	
	21				dei (Name or		AF)		_	1100	re Size (Example P21:	.5/65k	(15)
DOT No. (Example:		L9ABC0361		Origi	gina) Equipm or Repair	nent.		Failure Loca	Cation:				
Tire Component Cod	Е						_		_		e Fallure Type	_	
		ADDITION	WLITE	M 5 TO					_	A CHILD	SEAT FAILURE	_	
Make: Seat Type:		<u> </u>			Date Mai					Model No.	/Name:	_	
Seat Type: Child Seat Compone	ant Cod	fo:	Fa/	lled Part:	Installati	ion Sys	<u>.tem:</u>		_			_	_
with wave	III ~	<u></u>		AP	PPLICABLE	EING	DENT	T DFORMA	ATIO	N		_	
Crash	Fire		(P)ose I Numi	क्स वंस्तरार्थ	<i>be in delail th</i> ersons Intu	the Incider	ent/F)	Fallerofsi Co	adder.	s), and inter-	nviles).) ted to Police	—	
Yes X No	Пγе	es XINo	<u> </u>		D		i i i i	omber or Deat	Ons.		ted to Police N		
Le, parts repaired o) event Or repla	ta leading up t aced (and if o	to the fo	fallure, () t is a valle	(Z) tellure q lable).	and its	· 				was done to correct t		
NON FUNCTIONAL LAURINBURG, AND STILL TOOK ALMOS	D JOE 58	BROWN, ROCK	CK ing hai	AM) HAV	ve toud me	e is kno	IOWN I	I BY GM. AND	NC) AS D CO	S WELL AS	as other local GM Roblem, Even With	I DEAL I THIS	LERS (SILVESTRY, KNOWLEDGE, 1T

Include, if available; Police/Fire Department Report, Photos, and Repair Bryoge.

ATTACH ADDITIONAL SHFFYS Is NECESSARY
The Privacy Act of 1974-Public Law 93-579 This Information is requested pursuant to authority vested in the Historial Highway Treffic Safety Act and subsequent, amendments. You are under no obligation to respond this quastionnaire. Your responds may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the HHTSA proceeds with administrative enforcement or litigation against a manufacturer, your responds or a statistical summary thereof, may be used in apport of the agency's action.

								\neg	-	Form Ass	royedi	O.M.B. No. 2127-0000
			DO	T Auto S	Safety I	HotEne		I	FO	R AGENCY USE ON	LY :	100148
U.S. Department of Transportation				Owner port Veh			nnaire lects		Date Red	Rived	Rep	ository 🗍
National High				1-888-1	DASH-2	-DOT		1		7/4 2002	 	
Traffic Sefet	¥	TIME	- SPART	1-888) n.www.n	-327-4 htm://do		etilna	Ì	12	-JUL-2003		erence No. 025971
Administrati	фπ	411	DAILE:		ntaa	L-SOA L-	Otiliie ————	┙			100	725971
	01	WNER INFOR	MATIC)N (Туре	or Print	<u>) </u>		_	Nau ri me '	Telephone Number	F-me	I Address
Name						 .		Щ.	ou y can't	· cacpitorie (raince)		- AUG (C)
Address				Resta		Zip Cod			evening '	Telephone Number		
WATER	LOO			State	IA	Zip Cdd	<u> </u>					
Do you authorize In the absence of Signature of Own	of an aut	i to provide thorization, f	a copy o IHTSA l	of this rep WILL NOT	ort to the provide	your nam	e or address	vehic to the Date	rehicle	☐ YES manufacturer. IX ./	NO	
					VEHIC	LE INFO	RMATION					
17 digit Vehicle Iden	Micetion	Number Locate	ed at bat	tom of wind	tshield on d	river's side	Make			Model		Model Year
1GHDT13S02215	5861						OLDSMOBIL	E		BRAVADA		2002
Date Purchas		Dealer's Na	we sug	Telephone	a Number					Engine:		Fuel Type:
09-F88-01 Origin <u>al</u> Owns		[Dealer's City					State			No: Cylinders <u>6</u>		Gaş
<u> X </u>								Zip Co				·
Transmission Type	X Ar	ntilock Brakes		niethe			Vehicle Con 114200 EU	•		TEM:WIRING: INTER	IIOR II	INNED DASSI
AUTOMATIC	12 0 0	ruise Control	ALLV	WHEEL DR	IVE		Multiple Fal				4014	DIESER DASH
	_			FAXUE	20 COMP	CHENT(S)/PART(8) I	NEFOR	MATIO	*	_	
Incident Date(s) 09-JUN-2003		re Mleage 48900		Speed 65								··
	i	4.000	****	TTEMS Y		M Par array	WHENREPO	WOTT.	~			
Tre Make		7004	1	re Model	(Name or	Number)	WHENKE	WIT.		e Size (Brample P21	5/65R	15)
OT No. (Example:	DOTM	10ABC0361		C Celain	a) Sauism	ont		_				·,
				Prior R	al Equipm Lepair		Falure Locar	tion:				
Tire Component Co	de								Tire	Failure Type	•	· -
		ADDITECT	AL ITE	MŞ TO B	COMPL	ETED WH	EN REPORTI	NG A	CHILD	SEAT FAILURE		·
take:						ruracture d		М	todel No.	Name:		
eat Type: Third Seat Compone	ent Cod	e:	Fail	ed Part:	Installer id	on System	<u>. </u>					
Table Composit	414 044		- 10-		LICABLE	INCIDEN	T INFORMAT	TION	- -			
5	T-10-1						Falker(s), Co.					·
Crash □Yes XINo	Fire y	es 🗓 No	Humo	er of Pers O	adns Iniur		mber of Denti 0	ne:		ed to Police Ni		
Namative Descript	ion of L	ncident(5), C to leading plo	to the fi	Bure . (2)	la dure al	hel Ita cons	roquences, s	nd (3)	what w	es done te correct l	the fal	llure;
VEHICLE LOSES PO MY DEALER AND H HAVE AN ACCIDE HOUR A VEHICLE	OWER THE YOLD NT DURI CAN CO	TO DASH AND ME THEY CO ING A HEAVY OVER A LOT O	ALL CO OULDN'T THUND OF DISTA	MPONEN FIND AN ER STORM ANCE AND	TS CONTRYTHING W M WHEN TO I WAS B	ARONG, BA ME WIND LIND FOR	UT THEY TIGH SHIELD WIPE 15 SECONDS	ITENEI RS QU I MAI	D SOME IST FOR I NAGED T	DSHIELD WIPERS I GROUNDS. THIS AL ABOUT 15 SECOND TO GET OVER TO TH IN AND WILL WOR	MOST S AT E E SHO	5-70 MILES AN XULDER AND

THIS HAS HAPPENED TO ME ATLEAST 8 TIMES ONLY ONCE DID I ALMOST WRECK MY VEHICLE THOUGH. THE CLOCK ALWAYS HAS TO BE RESET WHEN THIS HAPPENS. *AK WINDSHIELD WIPERS WERE ON HIGH SETTING WHEN THEY STOPPED. DASH INSTRUMENTS BACKLIGHT WENT DARK AND GAUGE NEEDLES ALL WENT TO ZERO. *KIMB

Include, if available: Police/Fire Department Report, Photos, and Repair Involce.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This intermation is requested pursuant to multivority vested in the National Highway Traffic Safety Act and subsequent amountments. You are under an obligation to response this questionneity. Your response may be used to assist the MITSA in determining whother a Manufacturer cheuld take appropriate action to correct a safety defect. If the MITSA proceeds with administrative unforcement or Regulation against a manufacturer, your response, or a statistical summary thereof, may be used to proport of the agency's action.

OTHER COMPLAINTS

ODI	MAKE	MODEL	MY	VIN
10003244	CHEVROLET	TRAILBLAZER	2002	1GNES16S026130723
10003780	CHEVROLET	TRAILBLAZER	2002	1GNET16S026113644
10015855	CHEVROLET	TRAILBLAZER	2002	1GNDT13S122190479
10016974	GMC	ENVOY	2002	1GKDT13S422159885
759972	GMC	ENVOY	2002	1GKDT13S322281704
10026102	GMC	ENVOY	2002	1GKDT13SX22279030
10033085	GMC	ENVOY	2003	1GKET16S436141879
10019184	GMC	ENVOY	2003	1GKES16S536102768

				Auto 5	adamı I	uatific-		Ţ	FO	Form App.		M.A. No. 2127-00:68 0148
U.S. Departmo of Transportati		Veh	icie ()wnei	's Qu	estion faty Dof	naire	þ	ate Red			ittory 🗌
Notional High Traffic Safety Administration	,	INT		1-866-6 (1-866 ***********************************	-327-4		otline		23	-JAN-2003		rence No. (3244
	OV	NNER INFOR	MATTO	N (Type	or Print	<u>}</u>						
Name									aytime	Telephone Number	E-Mai	Address
Address										Talaphone Number		
CORTY FRESNO	}			State	ÇA	Zip Code		Ţ ⁼ '	raimiy	relepikore Number		
Do you authorize In the absence of Signature of Own	f an aut	to provide thorization, i	в сару о HHTSA В	f this rep VILL HOT	ort to the provide	e manufac your nam	turer of you e or addres	ur vehicles to the Data	e? vahicle <u>l</u>	□ YES menufacturer. /	NO:	
						CLE INFO						
17 digit Vehicle Ideni 1GNES16S026130		Number Locati	ed at bott	zim of Wind	ishleki on d	driver's side	Make CHEVROL	ET		Model TRAILBLAZER	Ι.	Model Year 2002
Date Purchas 28-JUL-02	ed	Dealer's Na	me and	Telephone	2 Number					Engine: No: Cylinders		Fuel Type: Gas
Original Owne	r .	Dealer's Cit	V				State	ZIp Coc	le	<u> </u>		
Transmission Type AUTOMATIC		nt Rock Brakes		rtrain WHEEL C	no fute		Vehicle C 136200 V			SHIELD WIPER/WA	SHEK:N	KOTOR
AUTOMATIC	IN C	uise Control			and v.		Multiple F	alure:	2			
	<u> </u>			FAIL	SD COMP	2)111310)/PART(S)	IN CR	MATTO	ra		
Incident Date(s) 22-3AN-2003	Failu	re Mileage	Palure	Speed			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>					
		ADDI					WHENRE	PORTIN	GATE	rë faxlure		
Tire Make			П	re Model	(Name or	Number)			Tim	e Size (Example P21	5/65R1	5)
DOT No. (Example:	DOTA	(L9ABC036)		Origin Prior F		rent	Feilure Lo	cation:	!			,
Tire Component Co	qe .									: Fallure Type		
		ADDITION	AL ITO	MS TO B				TINGA	CHilro	SEAT FAILURE		
Make:						nufactured		Me	odel No.	./Name:		
Seat Type:					Installet	on System	•					

Nerrative Description of Incident(S), Creek(es), and Injury (les).
Piesse describe (1) events leading up to the fellure, (2) failure and its consequences, and (3) what was done to correct the fellure; Le, parts repaired or replaced (and Fold part is available).

2NO FRONT WINDSHIELD WIPER MOTOR BEING INSTALLED... WINDSHILD WIPERS WOULD GO ON ALL BY THEIR SELFS... UNTIL PUSE PULLED OR ENGINE SHUT OFF... DEALER IS TELLING ME WATER IS GETTING INTO MOTOR HOUSING AND SHORTING OUT MOTOR.. ??? ALREADY SECOND TIME IN LAST 2 MONTHS.

APPLICABLE INCIDENT INFORMATION (Please describe in detail the incidentis), Failure(s), Crash(es), and Inlury (les),

Number of Deaths

0

Reported to Police

N

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice,

Falled Part:

Number of Persons Injured [

Crash

Child Seat Component Code:

Fire

∏Yes XX No \ Tes XX No

ATTACH ADDITIONAL SHEFTS IF NECESSARY

The Privacy Act of 1974-Public Law 93-379 This information is requested pursuant to outhority verted in the Rational Highway Traffic Safety Act and deliberquent amandments. You are under no obligation to respond this questionnaire. Your response may be used to assist the INTISA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the INTISA proceeds with administrative unforcement or litigation against a mounisteror, your response, or a statistical aumment thereof, may be used in support of the agency's action.

													<u> 2 M.S. M. 2127-4</u> 225
U.S. Departme			icle	OT Auto OWTH eport V	2r's	Qu	estion	naire _{fects}		Date Rec	R AGENCY USE ON		375 Deitory
National High Traffic Safet Administrati	iway /	IMI	ERN	1-888 (1-86 ETawwy	18-3	27-4	23ti)	iotline		14	-JAN-2003	1	ererica No. 103780
	OV	VNER INFOR	MAT	том (тур	M DI	Print)			Paulina 1	Telephone Number	E-mi	Address
Name			_							Caytine	reepitore winter	C-4181	Address
Address		<u> </u>								Prening 1	Telephone Number	ł	
City SAN JO	5E			Stat	e CA	١.	Zip Cod	e .					
Do you authorize In the absence of Signature of Own	f an aut	to provide horization, i	a cop VHTS	y of this r A WILL N	aport OT pr	t to the rovide	t menufar your nam	ctorer of you e or addre	our vah SS to ti Date	ie vehicle	Menufacturer.	NO.	
agradus on one					-	VEHII	LE INFO	RMATION					
17 diet Vehicle Iden	dification	Number Locati	ed at I	ottem of w							Model		Model Year
1GNET16S026111								CHEVRO	LET		TRAILBLAZER		2002
Date Purchas 27-SEP-02	sed	Dealer's Na	me ar	nd Telepho	ALIE M	umber					Engine: No: Cylinders		Fuel Type;
Original Own	*	Dealer's Cit	ÿ					State	Zíp C				·
Transmission Type AUTOMATIC		itliock Brakes ulse Control	Po	wertrain					_	ent Code	SHIELD WIPER/WA	SHER:	MOTOR
		100 001 M41						Multiple	Fakure:	:			
				FAI	1	COMP.	CHESH (S)/PART(S) INFO	RMATIO	N		
Incident Date(s) 01-JAN-2003	Fallur	re Mileage	Fai	ure Speed									
		ADDI	CON	AL ITEMS	70	BE CO	MPLETER	WHENRE	PORT	ING A TE	RE PAILLIRE		
re Make				Tire Mod	el (Na	ame cx	Mumber)			Tin	e Size (Example P2)	5/65R	15)
OT No. (Example:	DOTMA	(L9ABC036)		Orig	jinal E r Rep	Egyilpim xalir	ent	Failure Lo	xcetion:				
ire Component Co	de							•		Tire	: Fallure Type		
		ADDITION	MLT	YEMS TO	NE C	OMPL	ETED WA	IEN REPOR	TING.	A CHILD	SEAT FAILURE	_	
lake:					De	ite Mar	<u>lufact</u> ures	d:		Model No.	/Name:		
eat Type:						stallati	on Sy <i>s</i> ten	n:					
hild Seat Compon	ent Coo	e;		alled Part		CARM F	The True	NT INFORM	LATTO	<u> </u>			· ·
				leave descri	be in c	201 0	e incidentiis	L Pailura/sL	Crashie	L and inte			
Crash	Fire □ Ye	es IX No	Nu	ımber of P 	er50(ış In i lli	ned Nu	imber of De	etts		ed to Police N		
Marrative Descript Please describe (1 Ne, parts repaired) event	a leading up	to th	u fallure,	(2) 🙌	here a	nd its cor	160 quancas	, and (3) what w	as dens to correct	the fol	lare;
CONSUMER STAT	ES THAT		D WI	PER MOT	OR E	NGAGE	DWHILE	VEHICLE W	AS TUR	NED OFF	AND RAN CONTINU	X OUSL	Y UNTIL SERVI

Include, if available: Police/Fire Department Report, Photos, and Repair Invoke.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-979 This information is requested pluribable to authority vested in the Historia Highway Traffic Safety Act and subsequent amountments. You are used to assist the NHTSA in determining whether a Manufacturer should below appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or Ridgeton against a manufacturer, your response, or a statistical automary thereof, may be used in support of the agency's action.

			DO	T Auto	Safety F	lotline			FC	DR AGENCY USE ON	LY 124	
U.S. Department of Transportation		Veh	ikle	Owne	-	estio fety De	nnaire fects		Date Re	celved	Repository	<u></u>
Metional Higi Traffic Safet Administrati	y .	IMI	ERINET	(1-88	6-327-4: nhtsa ,do	236}	hot line		22	-APR-2003	Reference (10015855	ło.
	¢4	WIER INFO	RMATT	он (тур	e or Print	<u> </u>			Chuttmo	Telephona Number	E-mail Addres	_
Mama Address									On Paris	·	C-DBI AUGR	~
City MAUME	—— 11.E		<u> </u>	State	AR	Zip Cod	le _.	——I	Evening	Telephone Number		
Do you authorize In the absence of Signature of Owl	f an au	A to provide thorization, i	a copy (VHTSA	of this re WILL NO	port to the T provide	menufa your nes	cturer of you ne or eddres	er veh s to th Date	e rehicle	YES X	l NO	_
							RMATION					_
17 digit Vehicle Iden 1GNDT13\$12219		Mumber Locati	ed at bot	tom of wir	ndshleid on d	rivers skie	Make CHEVROU	ET .		Model TRAILBLAZER	Model Y 2002	′ear
Date Purcha:		Dealer's Na		Telephor	ne Number					Engine: No: Cylinders	Fuel Ty	/pe:
Original Own	er.	Dealer's Cit	y				State	Zip C	ade	ì		
ransmission Type		ntilock Brekes wise Control	Powe	rtrain			Vehide Co 162300 S				, I	_
		age control					Multiple F	elure:	1	···		
			-	FAIL	ED COMP	ONENT (S)/PART(5)	INPO	RMATIO)NE		_
incident Date(s) 10-MAR-2003	Fallui	re Mileage	Fallure	Speed								
		ADDIT						OKIT		REFAILURE		_
re Make			י ן	ire Model	(Name or	Number)			The	e Size (Example P21	5/65R15)	
OT No. (Example:	ÖÖTMA	(19ABC036)		Origin Prior	rai Equipm Renair	ent	Failure Loc	ation:				_
re Component Co	de			11780					Thre	: Failure Type		_
		ADDITION	AL ITE	MS TO E	E COMPL	TED WI	IN REPORT	ING /		SEAT FAILURE		
ake:					Date Man			$\overline{}$	ladel No.			_
est Type:	r_4	•			In <u>sta</u> llatio	n System	<u> </u>					
hild Seat Compone	ent Coo	e:	Fail	ed Part:	OLITON DI E	78644	T INFORMA					
			(Pleas	æ ⊘≈ στές	in detail the	incide mis	Fature(s), C	ON TOP	and inter	y (lest.)		
Crash Yes XNo Breative Descript	ion of D	teldent(\$), C	ranhi ea), and Im	rsons Imium iery(les).		mber of Dea		<u>L</u>	ed to Police N		
lease describe (1 e, parts repaired) event	a leading up	to the f	ilkre, (2) folkee en	id No con	sequenç es, (und (3	what w	us done to correct !	the follure;	
NSTRUMENT PAN	EL LIGH	ITS BURNED (OUT. T	E LEFT I	REAR DOO:	R HANDU AR HATO	E BROKE. TI CH PUU. STRA	HE WIN	(DSHIELL IKE, *A)	WIPER AND WASH	ER CAME ON A	AND CLE

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice,

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 93-579 This information is requested guravant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire, Your response way be used to esales the NATSA in determining whether a Manefacturer should take appropriate action to correct a safety select. If the NATSA proceeds with administrative enforcement or Registion against a manufacturer, your response, or a statistical continuity thereof, may be used in support of the apency's action.

O'.S. Department of Transportation To Report Vehicle Safety Defects 1-888-DA5H-2-DOT (1-888-327-4236) Traffic Safety Administration CWINER INFORMATION (Type or Print) Description Objects City BELLEVUE State WA Zip Code Evening Telephone Number E-mail Address City Bellevue Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Signature of Owner VEHICLE SPORMATION 17 digit Vehicle Identification Number Located at bottom of whichheld on drivert side Make GNIC ENVOY Model Provide Year 2002	~			DOT	Auto !	Safety	Hotilne			FO	R AGENCY USE ON	LY 100148
To Report Vehicle Safety Daffects 1.888-3.27-4.236) Traffic Safety Administration OWNER INFORMATION (Type or Priet) State Owner Information (Type or Priet) State Owner Information (Type or Priet) State St	U.S. Departmen	nt								Date Rec	zived	Repository 🗌
Transition Surface Name (Type or Priet) Daytina Telaphona Number Doubtine Daytina Telaphon	of Transportation	ın	To					efects		ĺ		
Description			TATE					hatilma		03-	MAY-2003	
State WA Zip Code Evening Telephone Number E-mel Address Edition Evening Telephone Number E-mel Address E-m	Administratio									l		15510374
State WA Zip Code Evening Talephone Number Engine: Type Antiock Brakes Pawertrain State Wehicle Component Code State Wehicle Component Code State Wehicle Component Code State	bme	OWNE	RINFORM	ATIO	N (Type	or Pris	t)			Caytima	Telephone Number	
State WA Zip Code Evening Telephone Number				_						ł		.am:
Do you authorize NHTSA to provide a copy of this report to the meaufacturer of your valide?	'itv	 F		_	State	WA	Zip Co	de		Evening 1	Talephone Number	·
Signature of Dwiner			oravide a i	coov o	f this cer	port to ti	he masuri	ecturer of yo	our vá/	icie?	ਜ਼ _ਪ	Luo.
VEHICLE INFORMATION 17 digit Vehicle Identification Number Located at bothern of whickhield on driver's side Marke GMC ENVOY 2002 16KOT135422159885 Dealer's Name and Telephone Number Engine: Fuel Type: 16-JUN-01 Dealer's City State Zip Code No: Cylinders Gas 16-JUN-01 Dealer's City State Zip Code No: Cylinders Gas 17 dings Component Code 136000 VISIBILITY: WINDSHELD WIPER/WASHER 18-JUN-01 Antisock Brakes Powertrain Vehicle Component Code 136000 VISIBILITY: WINDSHELD WIPER/WASHER 18-JUN-01 Multiple Failure: 1 18-JUN-01 Failure Mileage Failure Speed Failure Speed 18-JUN-01 Tree Model (Name or Number) The Size (Example P215/65R15) 18-JUN-01 Original Equipment Failure Location: 18-JUN-01 Tree Failure Location: Tree Failure Location: Tree Failure Location: 18-JUN-01 Tree Failure Location: Tree Fa	In the absence of	an author	ization, NH	TSA V	ATT NO	T provide	e your na	me or addre	es to t	ke vahida	manufacturer.	
Programme Prog	Signature of Own	er							Date	/		·
Date Purchased 16-3UN-01 Dealer's Name and Telephone Number Engine: Engine: No: Cylinders 6 Gas Original Owner Dealer's City State Zip Code AUTOMATIC IX Cruise Control FATLED COMPONENT(S) / PART(S) INFORMATION ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTING A TIRE FATLURE The Model (Name or Number) The Size (Example P215/65R15) Of No. (Example: DOTNALS/ABC036) Original Equipment Failure Location: The Failure Type ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FATLURE Bate Date Manufactured: Model No. (Name: Installation System APPLICABLE INCIDENT INFORMATION (Please describe in white the incidents). Cauth(s) and they (less) Tracsh Fire Number of Persons Intered Number of Persons Intered	47	Tourism Man	-har I arestari	28 ka#I	an of who						Mortel	I Bandal Van
Dealer's City State Zip Code No: Cyfinders 5 Gas.			under Lucates	at box	MINION WES		OLAS LE LA					
Transmission Type AUTOMATIC X AntSock Brakes Powertrain Vehicle Component Code 136000 VISIBILITY:WINDSHED WIPER/WASHER		ed De	aler's Name	and '	Telephon	e Numbe	•					Fuel Type: Gas
AUTOMATIC X Cruise Control		r De	aler's City					State	Zbo	Corde	_	
AUTOMATIC X Cruise Control Multiple Failure: 1 FAILED COMPONENT(S) / PART(S) INFORMATION Incident Date(s) Failure Mileage Failure Speed Incident Date(s) Failure Mileage Failure Speed Incident Date(s) Failure Mileage Failure Speed Incident Date(s) Failure Mileage The Model (Name or Number) The Size (Example P215/65R15) OT No. (Example: DOTMALSABCO36) Original Equipment Failure Location: Prior Repair Failure Location: Prior Repair Failure Type ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHILD SEAT FAILURE ADDITIONAL TIEMS TO BE COMPLETED WHEN REPORTINES A CHI	ransmission Type	X Antio	ck Brakes	Powe	rtrain			.]				
FAILED COMPONENT (S) / PART (S) INFORMATION Incident Date(s) Failure Mileage Failure Speed ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE PAILURE The Model (Name or Number) The Size (Example P215/65R15) OT No. (Example: DOTNAL9ABC036) Original Equipment Failure Location: The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE alea: Date Manufactured: Model No. /Name: alt Type: Installation Systems APPLICABLE INCIDENT INFORMATION (Please describe in Metal Naminal Failure(s), Credites), and Injury (less) Trash Fine Number of Persons Injured Number of Deaths Reported to Police Yes X No Yes X No O 0 N	AUTOMATIC	X Cruise	: Control								SHIELD WIPER/WA	SHER
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE PAILURE The Make Thre Model (Name or Number) The Size (Exemple P215/65R15) OT No. (Example: DOTINALSABCO36) Original Equipment Prior Repair Failure Location: The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE [aloe: Date Manufactured: Model No./Name: at Type: Installation Systems APPLICABLE INCIDENT INFORMATION (Please describe in ONAL IN installation). Consider), and interprise. APPLICABLE INCIDENT INFORMATION (Please describe in ONAL IN installation). Reported to Police Yes X No Yes X No 0 0 Number of Persons Intured Number of Deaths Reported to Police								<u>. </u>				
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE PAILURE The Make The Model (Name or Number) The Size (Example P215/65R15) OT No. (Example: DOTNALSABCO36) Original Equipment Prior Repair Failure Location: The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE alice: Date Manufactured: Model No. (Name: Bat Type: Installation Systems APPLICABLE INCODENT INFORMATION (Please describe in child the installation for Deaths) and interpring.) Crash Pre Number of Persons Intured Number of Deaths Reported to Police Yes X No Yes X No 0 0 0 Number of Deaths Reported to Police		F-2	 17			<u>ED 00M</u>	PONENT	S)/PART(S) INC	RMATEO	N	
The Model (Name or Number) The Size (Example P215/65R15) OT No. (Example: DOTMAL9ABC036) Original Equipment Prior Repair The Failure Location: The Failure Type ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE alee: Date Manufactured: Model No./Name: Installation Systems APPLICABLE INCIDENT INFORMATION (Please describe in detail the installation). Failure(s). Crush(es). and Injury (les).) Trash Pra Number of Persons Injured Number of Deaths Reported to Police Yes Xi No 0 0 N	• • • •	Failure P	mage (-asure	Sheen							
OT No. (Example: DOTMAL9ABC036)			ADDITE						PORT			
Prior Repair Passe Eposition	re Make			™	re Model	(Name o	r Number	1		Thre	a Ske (Example P21	15/65R15)
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FABLURE alice: Date Manufactured: Model No. /Name: Installation Systems APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Cresh(es), and Interv(les).) Trash Fine Number of Persons Induced Number of Deaths Reported to Police Yes X No 0 0 0 N	OT No. (Example: 1	DOTINALS/	(BC036)	7 1			ment	Failure Lo	xcatton	:		
Date Manufactured: Model No./Name:	ra Component Cod	e	_							Tre	Failure Type	
East Type: Installation System Initial Seat Component Code: Failed Part: APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Creatyles), and Injury (les).) Crash Fire Number of Persons Injured Number of Deaths Reported to Police Yes X No Yes X No 0 0 0		A	DITTONA	H	4S TO B							
hild Seat Component Code: Failed Part: APPLICABLE INCIDENT INFORMATION									1	Model No.	/Name:	 -
APPLICABLE INCIDENT INFORMATION (Please describe in chieff the incident(s), Falling(s), and intery (les),) Trash Fine Number of Persons Injured Number of Deaths Reported to Police Yes X No		ot Code:		Faik	ed Part	Installat	ion syste	<u></u>		·		·
rash Fire Number of Persons Injured Number of Deaths Reported to Police Yes X No Yes X No 0 0 N	na sauc companie	W. Cours.		1 4		PLICABL	E INCEDE	NT INFORM	LATIO	N	_	 -
Yes X No Yes X No 0 N												
	*\		- 1	THE			reol μ		aus			

FIRST, RAINSENSE WINDSHIELD WIPER EQUIPPED VEHICLE HAS WINDSHIELD WIPERS STOP AND STUTTER AT LEAST THREE TIMES ON EACH FORWARD AND BACK CYCLE WHEN IN INTERMITTENT MODE. WIPERS NOW DELAY UP TO 30 SECONDS AT TOP OF CYCLE (STRAIGHT UP ON WINDSHIELD) AND ARE GETTING PROGRESSIVELY WORSE. NEARLY CAUSED A COLLISION WITH VEHICLE IN FRONT. DEALER ATTEMPTED TO REPLACE "PULSE RELAY" WHICH DID NOT WORK AND THEN TECH STATED THEY OPERATE NORMALLY AND CUSTOMER DOES NOT UNDERSTAND FUNCTION OF RAINSENSE FRATURE DESPITE OWNING VEHICLE FOR 2 YEARS WITHOUT PRIOR ISSUE.

SECOND, RIGHT PASSENGER OUTSIDE MIRROR RANDOMLY CHANGES SETTING CREATING A SAFETY HAZARD DURING MANEUVERING OF VEHICLE. DEALER STATES THERE IS NO PROBLEM DESPITE FIXING AT LEAST 5 TIMES PRIOR. PLEASE NOTE PRIOR 19 COMPLAINTS WITH NHTSA ONLINE OUT OF 200 LISTED. THIS WOULD SEEM TO REQUIRE A RECALL. *JB

Include, If available: Police/Five Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS TE NECESSARY

The Privacy Act of 1974-Public Law 93-579 This information is requested pursued to authority wasted in the thickest Highway Traffic Selety Act and subsequent amendments. You are under no obligation to respond this questionnairs. Your response may be used to assist the MITSA is determining whether Manufacturar should take appropriate action to correct a safety defect. If the MITSA proceeds with administrative enforcement or litigation against a manufacturar, your response, or a statistical summary thereof, may be used in support of the agency's action.

Form	ADDITON	ed:CMLI	L Mg. 21.17-	0000

DOT Auto Safety Hotline

FOR AGENCY USE ONL	.Y	258	
Data Received	Rej	pository	

U.S. Departmen		Veh	icle O	wner' art Vehi	's Qu kle Sa	estion fety Def	inaire lect=		Data Rec	Neved .	Rep	oeitory L.J
or Transportation Nu Hopal High	-		1	-888-D	ASH-2	2-DOT	- 	ļ	29-1	MAR-2002	Ref	erence No.
Traffic Sefety	,	TMT		(1-686- www.nh		236) ot.gov/h	otline	ı		144K-2002	I	9972
Administratio												
Name	ρV	VMER INFOR	IQITAM	і (Туре с	or Print	9		— أ	Daytime '	Telephone Number	E-me	il Address
Address								—{				
City				State	PA	Zip Code	•	─ [Evenina 1	Telephone Number		
Do you authorize			- const 66	<u> </u>		<u>(</u> a manufan	turns of you	ur vahl	lolo 2		L	
In the absence of	'en aut	horization, A	HTSA W	TLL NOT	provide	your nam	a or addres	E to th	e vehicle	menufecturer.	NO	
Signature of Own	<u>er —</u>				1.00047			Date				
17 digit Vehicle Ident	Acation	Number Locate	ed at botto	en of winds		CLE INFOI driver's side			·	Model	-	Model Year
1GKDT135322281						-;	GMC			ENVOY		2002
							!					
Date Purches 01-NOV-01	ed	Denier's Na	me and Ti	elaphone	Number	-				Engine: No: Cylinders		Fuel Type: Gas
Original Owne	r	Dealer's Oits	7				State	Zpo	ode			
Transmission Type	X A	ntilock Brakes	Power	trein			Vehicle Cr	•				
	IXI c₁	uise Control	4 WHE	EL DRIVE						TEM: FUSES AND CI	RCUI	T BREAKERS
	<u> </u>						Muitiple F	'allure:	1			
			F- d		<u>р СОНІ</u>	PONESIT (S)/PART(5)	INFO	RMATIO	R .		
Incident Date(s) 29-MAR-2002	F# BUI	re Mileage	Failure :	-								
		<u></u>			2.75.65	4474 7777				T CATILIDE		
Tire Make		ADDII				r Number)	WHENKE			E FAILURE Size (Example P2)	I5/65F	(15)
OOT No. (Example:	DOTM	L9ABC036)	, <u>c</u>		i Equipo	nent	Failure Los	atton:	<u> </u>			
Tire Component Cor	Je .			Pr <u>lor R</u>	epair		14.422.44		- 1-	: Falure Type		
		Appriros	AL ITEM	S TO RE	СОМРІ	LETED WH	EN REPOR	iiiė.		SEAT FAILURE		
Make:		74,50			_	nufactures		_	Model No.			· • • • • • • • • • • • • • • • • • • •
Seat Type:				j		lon System						
Child Seat Compone	ent Cod	e:	Faile	d Part:	700 81	11577	IT INFORM.	ATTO:	•			
				describe i	n delait ti	he incidentis	l Fallsre(s). C	n de	d, and falor			
Crash Yes X No	Fire	es 🛣 No		er of Pers			mber of Dea	aths	Report	ed to Police N		
No realities Consected	ion of I) eveni	hcident(S), C to leading up	to the fa	llure, (2)	fallera :	and its con	sequences,	end (2	l) what w	es dons to correct	the fe	illure;
TURN SWITCH PR	EVIOUS	LY REPLACE	D BECUA:	SE HAZAF	EDS CAN	ME ON WH	EN PUTTING	ON TL	JRN SIGN	AL NOW WINDSH	IELD V	WIPERS ARE
STUCK ON AND H	AD TO E	PULL PUSE TO	STOP, 1	MILL BE R	ETURN)	ING TO DE	ALER, AGAII	N				
Inckvie, if availabl	e: Polk	e/Fire Depar	tment Re	oort, Pho	tos, and	d Repair In	voice.	nd 4				ETS DE NECESSARY
The Privacy Act of 197 Amendments, You are	4-Public Under S	Law 93-679 To a abligation to	va informa roccomé ti	gign is req His nuest lo	oested pr oneir e. T	ersuant to a Cer redeems	с мих рс ож ислотку чест	ga ip th d towar	= martion;all dat the M-∏	Highway Traffic Galety ISA in determining wi	y wet a other :	no supesquent Hanufocturer

should take appropriate action to correct a selety defect. If the MITEA proceeds with administrative enforcement or Migation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the against action.

CONTINUE ON BACK FREEDED

				Auto Safety Hotline	1		FOI	R AGENCY USE	ONL	ŕ 2	56	
U.S. Department	•	V	shicle	Owner's Que	stionnaire	.	Date	Received	Dα	or		
of Transportation				ONWIDE 1-800-424					_ r∟a	it _		
National High	way		DC ME	TRO AREA (202) 36	86-0123		25	-MAR-2002	þa_			
Treffic Safety Administratio		- 1	NTERNE	:T: http://www.nhts	a.dot.gov		l		Б Р_	, ur		<u> </u>
- Fallington		E AF	ARMATK	ON (Type or Print)			1		Redo	мерсе	No.	
- -	V1111	EK MI		ore [13he or 1 mm]		一	l		75	9972		
-							Work	Number				
HAVERTON	٧N			PA '			Home	Humber -				
Do you authorize	NHTS	A to prov	vide a cop	y of report to the manul WILL NOT provide you	acturer of your v	ehic	le?	YES	_ N	3		
Signature of Own	Br	I KA IZALI		THE NOT PROTECTOR				Date/_		_		
				VEHICLE	INFORMATION							
Vehicle (dent. No. (VIN.)		t betom of	Vehicle Make	Vehicle Model			Vehicle Year	Cum	ent Odd	meter	Readin
1GKDT13S32	2281		Shire eravirla	GMC	ENVOY			2002				
Purchase Dat	_						<u> </u>	Engine Size			Tarbo Diesel	_=
01-NOV-200	1	Desier's	Name				-	(CID/CC/L	<u>4.3 L</u>	H	Ges	
New Duse	덦	City		State	Zip Code		_ [No Cylinders _		· 🔀	Fuel In	jec 10
Transmission Type	Antiloc	k Brakes	Restraint	System	Cruise Contro	Drtw	e Trai	Vehicle Type		Box	dy Style	<u> </u>
	I	Yes	IXI 3-Poli	nt Belt Molorbek	. ⊠Yes		Front	Car 🔲	port UI	· I□	2-Doo	
I 🗔 🔝 📗	_		☐ Drive	rside Airbag 2-Point Br		7	Rear		iruck Aotorey	ᇜH	4-Doo Station	r Wagon
Autometic	Ц	Na	I □ Pess	engerside Airbeg	□ №	X	4-Whe	해 님 oner_ 브	- - '	ᄖ	Pick U	to Truck
				· · · · · · · · · · · · · · · · · · ·	<u> </u>					<u> </u>		<u></u>
	IR4 1			FAILED COMPONE	NT(S)/PART(S							
Compenent 09310000	HIGH	lemo(s TING: FU:	BE:TURN	SIGNAL LIGHTS		ļ	Location	n ⊟ Right	F aile d P	ranga Origina	.1	
10310090	VISU/	AL SYST	EMS:WIND	SHIELD WIPER		ı		ont Reer		Replac		
No of Failure	Date(s) of Falk	JTE(S)	29-MAI	R-2002			Falled	NHT			
t	Milea	ge of Falk	ure(s		900			Part(s)	1	lously		- 1
	Vehic	le Spaed	at Fal lure (:	s) <u>1</u>	0				,l 🗆	Yes	□No	
•	. (Please de	secriba in c	APPLICATION APPLICATION APPLICATION APPLICATION (S.) Failure (S.) Fail	ON INCIDENT re(s), Crash(ss), (INF and fr	ORM.	ATION s) on the back of th	is form	a		
Cresh	T	Are	Num	ber of Persons injured	Number of Fetal	tte	E	itimeted Property (amag	Repo	rted to	Pelic
∏ Yee ∏ No	╢╸	Yes 200	No							╽╻╸	es [∑ No
	<u> </u>	•					Ш.					
	• • • • • • • • • • • • • • • • • • • •	N/	\RRATI\	/E DESCRIPTION O	F FAILURE(S)	, IN	CIDE	NT(S), INJURY	(IES)			
	IELD			LACED BECUASE H STUCK ON AND HA								

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 this questionnaire, Your response may be used to assist the NHTSA in determining whather a manufacturer should take appropriate action to correct a safety defect, if the NHTSA proceeds with administrative enforcement or Higation against a manufacturer, your response, or a statistical summary theraof, may be used in support of the agency's action.

										Form And		0.M.B. No. 2227-0000
			·	OT Auto :	Safatu	Hotline			FO	R AGENCY USE ON		00148
U.S. Departme			ick	e Owner	r's Qu	restion			Date Red			ository 🗌
National High Traffic Safety Administration	lway f	INT	ern	1-888- (1-889 ET:www.n	-327-4	1236)	otline		15	-JUL-2003		erence No. 126102
	DM	NNER INFOR	MA'	TION (Type	or Prin	t)			<u></u>			
Name					•	•			Daytime '	Talephone Number	E-mai	Address
Address			_								l	
BAYON	NE		_	State	ND CN	Zip Code	E		d Evening 1 •	Telephone Number		
Do you authorize In the absence of Signature of Own	f вл aut	to provide of thorization, h	, сар НТ5	y of this rep A WILL HOT	port to the provide	e your nam	turer of yo e or addre	or vel ss to t Dab	he vahicie	☐ YES IX manufacturer.	NO.	<u> </u>
					VEN	CLE INFO	RMATION					
17 digit Vehicle Ideni 1GKDT13SX22279		Number Locate	sd at	battom of Wirk	dshleki on	driver's side	Make GMC	·		Model EWOY		Model Year 2002
Data Purchas 09-NOV-01	ed	Dealer's Nat	ne a	nd Telephon	e Numbe	T	<u> </u>			Engine: No: Cylinders <u>6</u>		Fuel Type: Gas
Original Owns	<u> </u>	Dealer's City	<i></i>				State	Zip	Code	_		
Transmission Type AUTOMATIC	\Box	ntilock Brakes	l .	wertrain WHEEL DRIV	ne .		1		nent Code E ANO ENC	ME CODLING: ENG	TNE	
AUTOMATIC	IXI C	ruise Control	7	MINEEL DATA			Multiple	Fallure	:: 1			_
				PAIL	ED COMI	PONENT(S)/PART(S) INT	RMATIO	N		
Encident Date(s) 09-3UN-2003	Failu	re Mileage 16000	Fai	iure Speed O								
		ADDIT	TON	AL ITEMS 1	D BE CO	MPLETED	WHEN RE	PORT	ILT A ENT	RE FAILURE		_
Tire Make				Tire Model	(Name o	r Number)			Tin	e Size (Example PZ1	.5/ 65 R	15)
DOT No. (Example:		ALSABC036)			al Equipr Repair	ment ————	Failure Lo	cation	4			
The Component Co	de								Tire	Failure Type		
		ADDITION	AL I	темя то в	c COMP	LETED WIT	EN REPOR	TING	A CHILD	SEAT FAILURE		
Maka:						snufactured			Model No.	./Name:		
Seat Type:		 .		F_1_1 P- 1	Installat	tion System	<u> </u>					
Child Seat Compone	ent Cod	He.:		Failed Part:	H TC4 D'	E INCIDEN	T TAKEND !	12770				
	_			Yearse describe	in detail t	he inddentis				v (ks).)		
Crash	Fire □ Y	es X Ng.	N	umber of Per	sons Inju	ured Ne	mber of De	aths	Report	ed to Police N		
Nerrotive Descript Picase describe (1 Le, parts repeired	ion of I	ncident(S), C is leading up	to ti	ie faithre, (2) tallure	and its con	sequences	, and (3) what w	uu done to correct	the fo	lare)
WHILE WAITING	TO PRO	CEED IN TRA	FFI(WITH FOO	TON BRA					ENLY STALLED OUT		

PROPERLY WHEN IN INTERMITTENT MODE. CAR IS AT DEALER NOW, HOPEFULLY THEY CAN RESOLVE THIS. *AK. VEHICLE IS EQUIPPED WITH RAINSENSE AUTOMATIC RAIN SENSING WIPERS. RAINSENSE WORKS ONLY WHEN IN INTERMITTENT MODE. SETTINGS ADJUST SENSITIVITY OF WIPERS BUT NOT FREQUENCY, WIPER FAILS TO MAKE A COMPLETE SMOOTH PASS ACROSS WINDSHIELD. THEY STOP SEVERAL TIMES DURING THEIR SWEEP AND STUTTER. AFTER A FEW SECOND PAUSE THEY RESUME THEIR SWEEP, WIPERS WORK FINE WHEN SET TO STANDARD HIGH OR LOW WIPER SETTINGS. *KMB

Include, If available; Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974-Public Law 90-519 Two Information is requested gureaust to authority vested in the little and Highway Trailic Sefety Act and subsequent amountments. You are under no obligation to respend this questiormake. Your respends may be used to add the MITSA in determining whether a Manufacturer should take appropriate action to correct a safety delect. If the MITSA precede with administrative exforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

									North And	woved:C	3, M.J., No. 2127-0014		
		· p	OT Auto S	iafety Ho	FOR AGENCY USE ONLY 100148								
U.S. Departme		hicle To Re	Owner	ilcie Šafe	Date Re	csived	Repository 🗌						
National High			1-888-0	DASH-2-E	TÜÜ								
Traffic Sefety				-327-423				19	-AUG-2003	1	erence No.		
Adm inistration		TERN	ET awww.n	htsa.dot.	.gov/h	otine		l		100	33085		
	OWNER INFO	RMAT	TON (Type	or Pr i nt)				<u> </u>		<u> </u>			
Name	_			•				Daytime	Telephone Number	E-meil	Address		
Address								<u> </u>		! '			
CILY	lD		State	NH Zip Code				Evening	Telephone Number	ĺ			
Do you authorize In the absence of Signature of Own	MHTSA to provid f an authorization, er	a copy NHTSA	y of this rep A WILL NOT	art to the a provide yo	nenufez our nem	turer of you e or addres	ur vet ss to ti Date	he vehicle	YES X manufacturar.	l NO			
				VEHICL	E DIPO	RMATION					···		
17 digit Vehicle Ideni	dification Number Loca	rted at b	ottom of wind	shleid on driv	Make			Model		Model Year			
1GKET16S436141	879		•	GMC			ENVOY		2003				
Date Purchas 20-3AN-03		id Telephone	phone Number				Engine: No: Cylinders		\neg	Fuel Type:			
Original Owne	r Dealer's C	ły 		State	Zip (Code		1					
Transmission Type	Antilock Brak	es Pov	wertrain										
	X Cruise Contro	ای			136100 VISIBILITY: WINDSHIELD WIPER/WASHER: SWITCH/WI								
						Multiple F	Fallure:	: 2					
				D COMPO	NENT (S	<u> </u>	INFO	RMATIC	ж				
Incident Date(s) 02-AUG-2003	Failure Mileage	Fallu	ire Speed										
	ADD	TTOM	LITEMS TO	O BE COM	PLETED	WHEN RE	PORT	ING A TI	RE FAILURE				
Tire Make			Tire Model (e Size (Example P21	5/65R1	5)		
DOTNo. (Example:		Origina Prior R	Failure Location:										
Tire Component Co	cket							TIFE	e Falure Type				
	ADDITIC	MALIT	EMS TO BE	COMPLET	ED WH	EN REPOR	TINE	A CHILD	SEAT FAILURE				
Make:			ſi	Date Manuf	<u>factur</u> ec	lt	Į	Model No./Name:					
Seat Type:				<u>Instalation</u>	System	.							
Child Seat Compone	ent Code:	FI	alled Part:										
		Pk	APPE Lease describe 1	TCABLE III	podents)	F INFORMA	AT301	Ni st. and into	ruflor) }				
Creath ☐Yes M(No	Fire Yes X No		to in detail the incidentis). Fatherels). Creates ersons Injured Number of Deaths 0 0				Reported to Police						
Mariative Descript	ion of Incident(5), ovents leading u	p to the	: falkme, (2)	failure and	ks con	andneæcer,	and () what w	es done to correct !	tire Call	ure;		
WHILE PARKED IN WINDSHIELD WIP BACKED VEHICLE CAUGHT ON FIRE!	MY GARAGE W/ E ERS WERE SPRAYI DUT OF GARGAGE DEALER REPLACE O OFF B. ON EVEN	NGINE (NG SPO & PULL D WIPE	OFF. I CAME INTANEOUS ED OUT PUS ER MOTOR S	AROUND 1 LY & WIPER E. SPRAY S TATING IT	IS WERE STOPPEE HAO BES	E RUNNING. D, BUT WIPE EN FLOODE	ENGII ERS ST D W/ Y	NE WAS N TILL PROC WATER, P	NNING, MY GMC 200 MAKING A LOUD SCR MEDED TO GO. ENG REVIOUSLY TO THI RS STOPPED WORK	LEECHIJ SINE CO S EVENI	NG NOISE. PULD HAVE C. THE ERONT		

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NETESARY
The Privacy Act of 1974-Public Law 82-379 This information is requested pursuant to authority vested in the National Highway Treffic Safety Act and subsequent amendments. You are some no obligation to respond this questionsales. Your response may be used to assist the MITSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the MITSA proceeds with administrative enforcement or Relation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

DOT Auto					Safety Hotline				FOR AGENCY USE ONLY 100148				
U.S. Department of Transportation		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects							Date Received		Repository 🗔		
Netional Hig Traffic Safet Administrati	IMI	DASH-2 8-327-4 htsa.do		otline		23-MAY-2003		Reference No. 10019164					
	01	WNER INFOR	ETAMS	он (Тур	or Print	1		_	Do di	Talada a a birada			
de mie		_							Бороны	Telephone Number	CHIA	Accress	
iddress Sty							AL Zip Cocle			Evening Telephone Number			
						<u> </u>			<u> </u>				
Do you entharize In the absence of Signature of Ow	fan eu	to provide thorization, i	a copy VHT5A	WILL NO	port to the T provide	hors sauce a wanntac	turer of yo	sur ven ss to t/ Dabe	he vehicle	₩ YES manufacturer. <u>J</u>	NO		
					Veltax	LI INFOR	MATION			•			
i7 digit Vehicla Idar 1GKES16S53610	dshield on d	iriver's side	Make GMC			Model ENVOY		Model Year 2003					
Data Purchased Dealer's Name and Telephon 10-AUG-02 BENTLEY GMC 256-536-247.								•	Engine: No: Cylinders 6			Fuel Type:	
Original Owner Dealer's City HUNTSVILLE					State Zip AL			Zip C	Code				
ansmission Type X Antilock Brakes Powertrain AUTOMATIC X Cruise Control REAR WHEEL					Ushide Comp 136200 VISIO Multiple Fallu			VISIBIL	BILITY: WINDSHIELD WIPER/WASHER: MOTOR				
the state of the s	I Falls	vo Menos	E-A-		250 COMP	CHEMIL(2))/PART(\$) INPO	RMATIO	N .			
ncident Data(s) 1-MAY-2003		Failure Speed 8900											
		ADDI	TONAL	T 545 T	TO BE CO	MPLETED	WHENRE	PORT	DIG A TI	E FAILURE			
re Make			1	Tina Model	(Name or	Number)			Titre	: Sze (Example P21	5/65R	15)	
					nel Equipment Failure Locat			czitlon:	:			<u>-</u>	
re Component Co	de								Tire	Failure Type			
-		ADDITION	AL ITE	MS TO B	E COMPL	ETED WH	EN RÉPÓR	TING.	A CHILD:	SEAT FAILURE			
Make: Date Manufacture							· · · · · · · · · · · · · · · · · · ·						
eat Type:	1 2				Installati	on System							
niid Seat Compon	ent Cod	ie:					T INFORM						
rash	Fre				: In detail th rsons Intur		Feikneis) of De			ed to Police			
		es 🗶 No		0	3313 11111	1901	D D			N			
					jury(las).								

SEPTEMBER 2002. AT THAT TIME, THE DEALER ALSO REPLACED THE WIPER MOTOR.

Include, if available: Police/Fire Department Report, Photos, and Regair Involce.

ATTACH ADDITIONAL SHEETS IF NECESSARY
The Privacy Act of 1974-Public Law 93-575 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. Too are under no obligation to respond this questionnairs. Your response may be used to assist the NATSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NATSA proceeds with administrative unforcament or fitigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action. ATTACH ADDITIONAL SHEETS IF NECESSARY