





MALIBU

JIM REED  
NASHVILLE

JIM REED  
NASHVILLE













































MFD BY GENERAL MOTORS CORP

DATE	GVWR	GAWR FRT	GAWR RR
08/04	1845 KG	949 KG	896 KG
	4068 LB	2093 LB	1975 LB

THIS VEHICLE CONFORMS TO ALL APPLICABLE U.S. FEDERAL MOTOR  
VEHICLE SAFETY, BUMPER, AND THEFT PREVENTION STANDARDS IN  
EFFECT ON THE DATE OF MANUFACTURE SHOWN ABOVE.

1G1ZS52F05F

TYPE: PASS CAR





































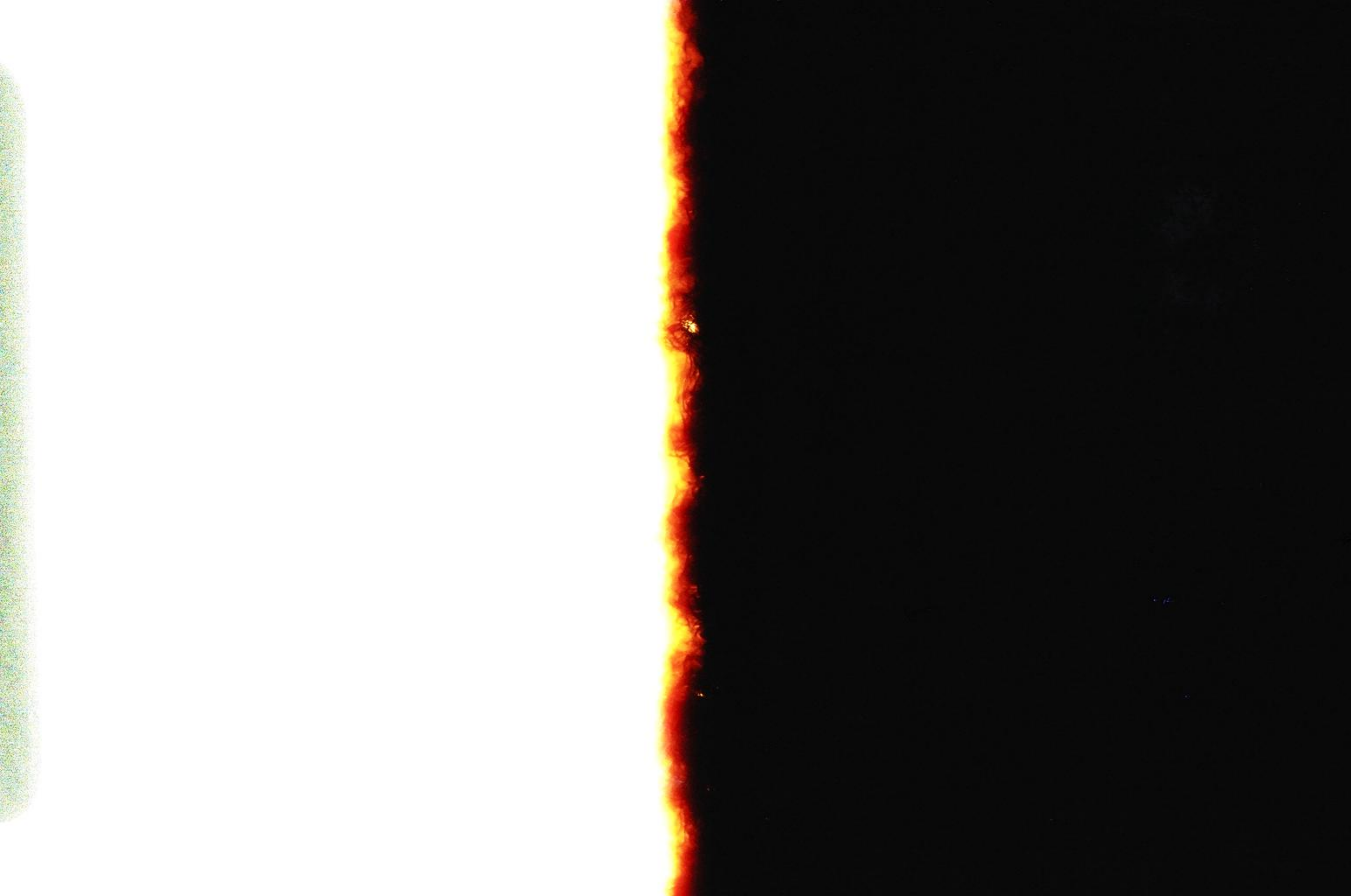




















































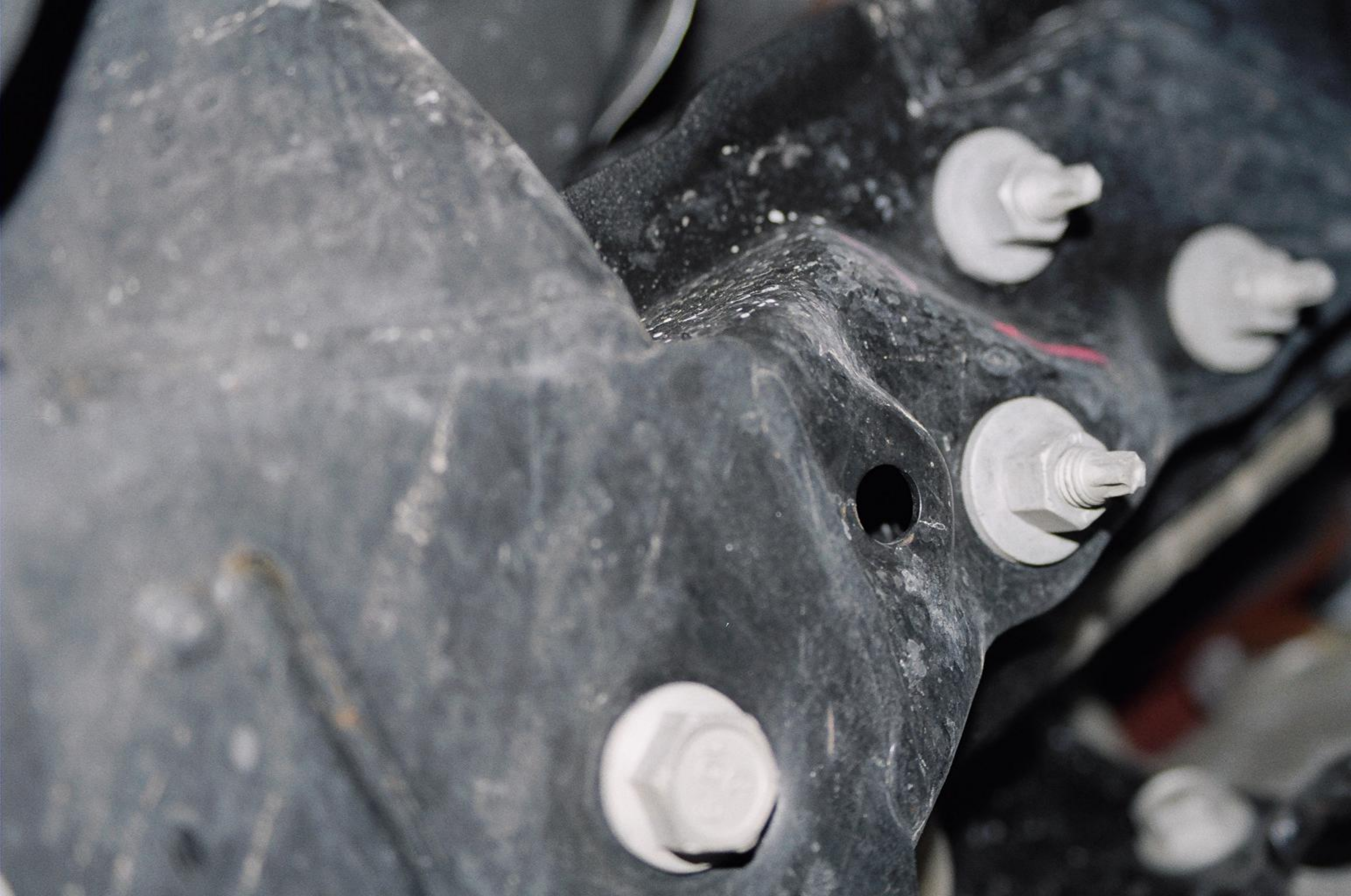
































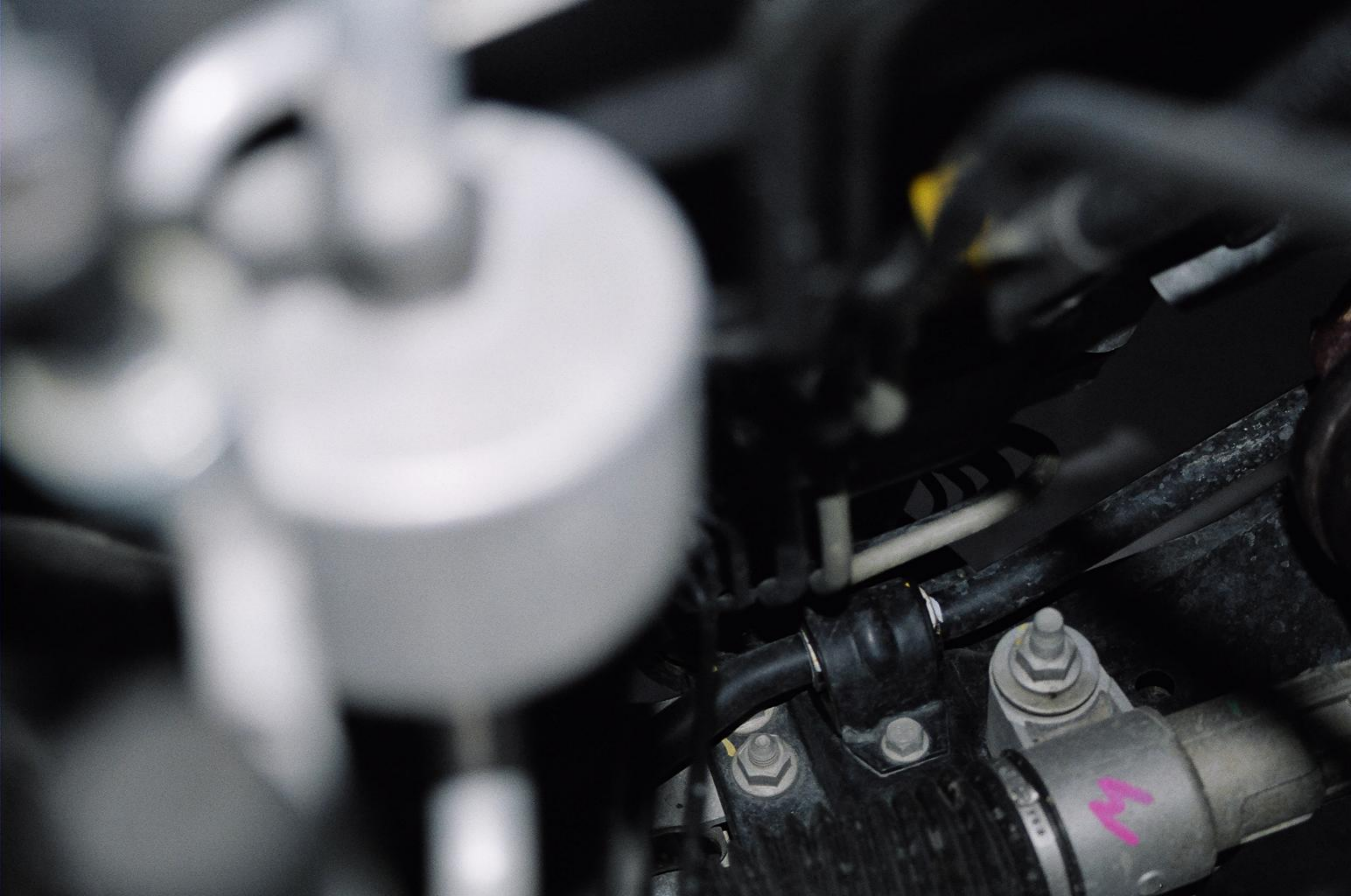


































**Photo Log**  
**PAR 1-401424761**  
**1G1ZS52F05FXXXXXX**  
**Photographs by Donald J. Hutelin, EAA**  
**4/13/2006**

Roll 1

1. LF of vehicle
2. Center front of vehicle
3. RF of vehicle
4. RR of vehicle
5. Center rear of vehicle
6. LR of vehicle
7. RF of vehicle
8. RF of vehicle
9. Hood
10. Hood and RF corner
11. LF wheel and tire
12. LF brake assembly & suspension
13. RF wheel and tire, note bent rim
14. RF inner fender showing tire contact area
15. VIN plate
16. Door jam sticker
17. Speedometer cluster
18. Dash from drivers door
19. Front seat area
20. Drivers seat belt buckle and blade
21. Drivers headrest
22. Drivers seat belt guide loop
23. Passenger seat belt, locked in stowed position
24. Passenger dash area

Roll 2

1. Headlamp assembly, laying on shop floor
2. Undercarriage. RF frame rail showing witness marks
3. Undercarriage. RF frame rail showing witness marks
4. RF suspension witness marks
5. RF suspension
6. Trying to show RF rack and pinion
7. Trying to show FF rack and pinion boot
8. RF hubcap
9. Trying to show rack and pinion
10. RF wheel and tire assembly.
11. RF wheel and tire assembly
12. RF wheel and tire assembly
13. Trying to show RF rack and pinion boot
14. RF frame
15. Floor pan looking to rear
16. Undercarriage. Frame rail and oil pan
17. Undercarriage. Showing witness marks
18. Undercarriage. Oil pan area
19. Undercarriage. Witness marks
20. Undercarriage. Witness marks on RF strut
21. RF fender looking forward from R side
22. RF bumper cover looking from right side to center of vehicle
23. RF hubcap
24. RF wheel/tire assembly and hubcap



25. **INFORMATION Redacted PURSUANT TO  
THE FREEDOM OF INFORMATION ACT  
(FOIA), 5 U.S.C. 552(B)(6)**



## CDR File Information

Vehicle Identification Number	1G1ZS52F05F [REDACTED]
Investigator	Donald J Hutelin, EAA
Case Number	1-401424761
Investigation Date	Thursday, April 13 2006
Crash Date	Saturday, March 25 2006
Filename	1G1ZS52F05F [REDACTED].CDR
Saved on	Thursday, April 13 2006 at 10:57:50 AM
Collected with CDR version	Crash Data Retrieval Tool 2.800
Collecting program verification number	9238B95E
Reported with CDR version	Crash Data Retrieval Tool 2.800
Reporting program verification number	9238B95E
Interface used to collected data	Block number: 00 Interface version: 4A Date: 11-08-05 Checksum: 7500
Event(s) recovered	Non-Deployment

## SDM Data Limitations

### SDM Recorded Crash Events:

There are two types of SDM recorded crash events. The first is the Non-Deployment Event. A Non-Deployment Event is an event severe enough to "wake up" the sensing algorithm but not severe enough to deploy the air bag(s). It can contain Pre-Crash and Crash data. The SDM can store up to one Non-Deployment Event. This event can be overwritten by an event that has a greater SDM recorded vehicle forward velocity change. This event will be cleared by the SDM after the ignition has been cycled 250 times. The second type of SDM recorded crash event is the Deployment Event. It also can contain Pre-Crash and Crash data. The SDM can store up to two different Deployment Events, if they occur within five seconds of one another. Deployment Events cannot be overwritten or cleared from the SDM. Once the SDM has deployed the air bag, the SDM must be replaced. The data in the Non-Deployment Event file will be locked after a Deployment Event, if the Non-Deployment Event occurred within 5 seconds before the Deployment Event unless a Deployment Level Event occurs within 5 seconds after the Deployment Event, then the Deployment Level Event will overwrite the Non-Deployment Event file.

### SDM Data Limitations:

- SDM Recorded Vehicle Forward Velocity Change reflects the change in forward velocity that the sensing system experienced during the recorded portion of the event. SDM Recorded Vehicle Forward Velocity Change is the change in velocity during the recording time and is not the speed the vehicle was traveling before the event, and is also not the Barrier Equivalent Velocity. This data should be examined in conjunction with other available physical evidence from the vehicle and scene when assessing occupant or vehicle forward velocity change. For Deployment Events and Deployment Level Events, the SDM will record 220 milliseconds of data after deployment criteria is met and up to 70 milliseconds before deployment criteria is met. For Non-Deployment Events, the SDM will record up to the first 300 milliseconds of data after algorithm enable. The minimum SDM Recorded Vehicle Forward Velocity Change, that is needed to record a Non-Deployment Event, is 5 MPH.
- Maximum Recorded Vehicle Velocity Change is the maximum recorded velocity change in the vehicle's combined "X" and "Y" axis.
- Calculated Principal Direction of Force (PDOF) is the arctangent of the maximum observed lateral velocity change divided by the maximum observed longitudinal velocity change. PDOF is displayed where zero degrees is located at the front of the vehicle, with 90 degrees is displayed to the right side of the vehicle and so on, clockwise around the vehicle.
- Event Recording Complete will indicate if data from the recorded event has been fully written to the SDM memory or if it has been interrupted and not fully written.
- SDM Recorded Vehicle Speed accuracy can be affected if the vehicle has had the tire size or the final drive axle ratio changed from the factory build specifications.
- Brake Switch Circuit Status indicates the status of the brake switch circuit.
- Pre-Crash Electronic Data Validity Check Status indicates "Data Invalid" if the SDM receive an invalid message from the module sending the pre-crash data.
- Driver's and Passenger's Belt Switch Circuit Status indicates the status of the seat belt switch circuit. The Passenger Belt Switch Circuit Status for 2006 Chevrolet Cobalt Sport Coupe (AP) model vehicles, with the option package that includes Recaro brand seats (RPO ALV), will always report a default value of "Buckled".
- The Time Between Non-Deployment and Deployment Events is displayed in seconds. If the time between the two events is greater than 5 seconds, "N/A" is displayed in place of the time. If the value is negative, then the Deployment Event occurred first. If the value is positive, then the Non-Deployment Event occurred first.
- If power to the SDM is lost during a crash event, all or part of the crash record may not be recorded.
- The ignition cycle counter relies upon the transitions through OFF->RUN->CRANK power-moding messages, on the GMLAN communication bus, to increment the counter. Applying and removing of battery power to the module will not increment the ignition counter.

### SDM Data Source:

All SDM recorded data is measured, calculated, and stored internally, except for the following:

- Vehicle Status Data (Pre-Crash) is transmitted to the SDM, by various vehicle control modules, via the vehicle's communication network.



-The Belt Switch Circuit is wired directly to the SDM.



## System Status At AE

Vehicle Identification Number	**1ZS52F*5*
Low Tire Pressure Warning Lamp (If Equipped)	Invalid
Vehicle Power Mode Status	Run
Remote Start Status (If Equipped)	Inactive
Run/Crank Ignition Switch Logic Level	Active
Brake System Warning Lamp (If Equipped)	OFF

## System Status At 1 second

Transmission Range (If Equipped)	Fourth Gear
Transmission Selector Position (If Equipped)	Drive
Traction Control System Active (If Equipped)	Invalid
Service Engine Soon (Non-Emission Related) Lamp	OFF
Service Vehicle Soon Lamp	OFF
Outside Air Temperature (degrees F) (If Equipped)	25.7
Left Front Door Status (If Equipped)	Closed
Right Front Door Status (If Equipped)	Closed
Left Rear Door Status (If Equipped)	Unused
Right Rear Door Status (If Equipped)	Unused
Rear Door(s) Status (If Equipped)	Closed

## Pre-crash data

Parameter	-2 sec	-1 sec
Reduced Engine Power Mode	OFF	OFF
Cruise Control Active (If Equipped)	No	No
Cruise Control Resume Switch Active (If Equipped)	No	No
Cruise Control Set Switch Active (If Equipped)	No	No

## Pre-crash data

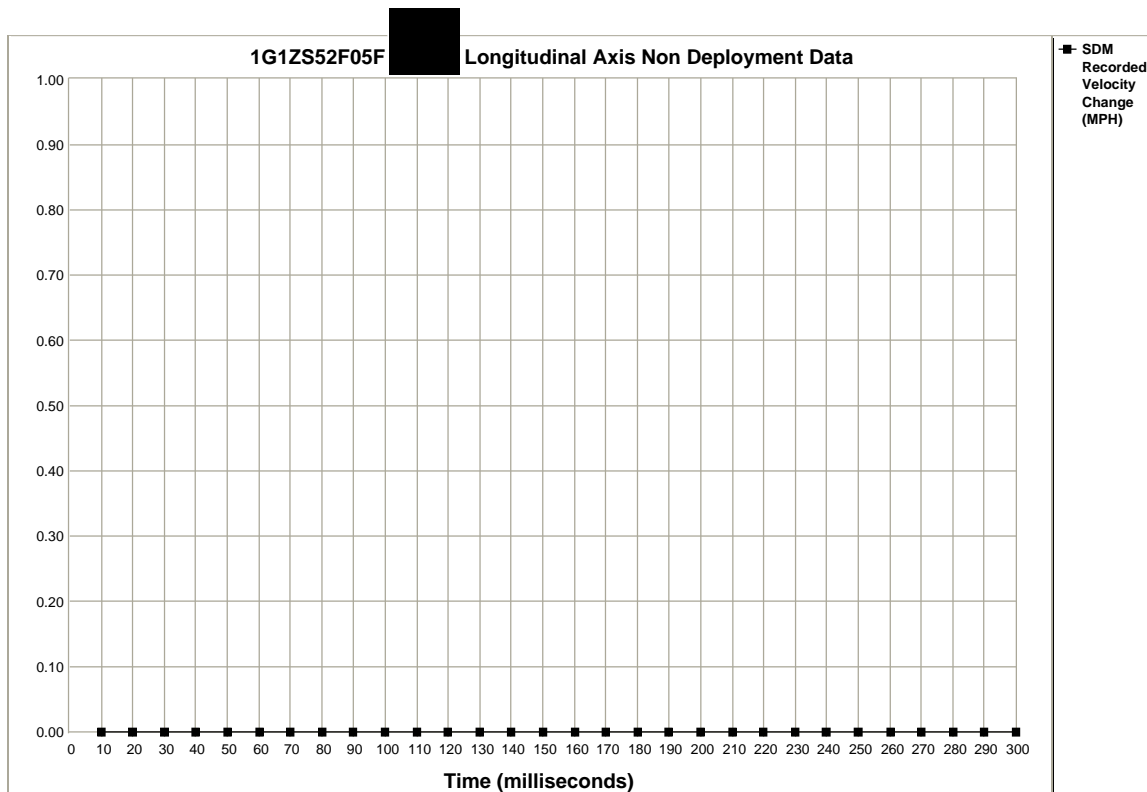
Parameter	-5 sec	-4 sec	-3 sec	-2 sec	-1 sec
Vehicle Speed (MPH)	57	57	58	57	52
Engine Speed (RPM)	1920	1920	1920	1984	1664
Percent Throttle	42	42	42	15	7
Accelerator Pedal Position (percent)	18	18	18	0	0
Antilock Brake System Active (If Equipped)	Invalid	Invalid	Invalid	Invalid	Invalid
Lateral Acceleration (feet/s²)(If Equipped)	Invalid	Invalid	Invalid	Invalid	Invalid
Yaw Rate (degrees per second) (If Equipped)	Invalid	Invalid	Invalid	Invalid	Invalid
Steering Wheel Angle (degrees) (If Equipped)	0	0	0	0	-16
Vehicle Dynamics Control Active (If Equipped)	Invalid	Invalid	Invalid	Invalid	Invalid



## System Status At Non-Deployment

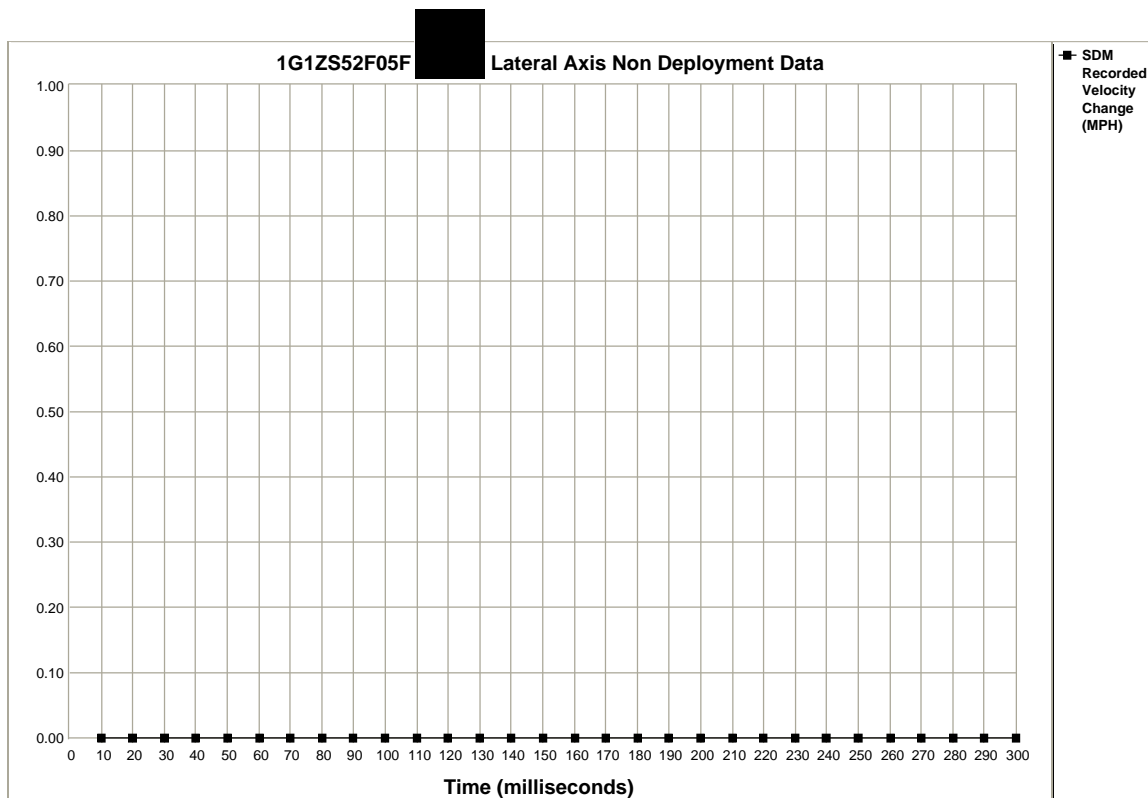
Ignition Cycles At Investigation	1565
SIR Warning Lamp Status	OFF
SIR Warning Lamp ON/OFF Time (seconds)	655200
Number of Ignition Cycles SIR Warning Lamp was ON/OFF Continuously	1350
Ignition Cycles At Event	1358
Ignition Cycles Since DTCs Were Last Cleared	254
Driver's Belt Switch Circuit Status	BUCKLED
Diagnostic Trouble Codes at Event, fault number: 1	N/A
Diagnostic Trouble Codes at Event, fault number: 2	N/A
Diagnostic Trouble Codes at Event, fault number: 3	N/A
Diagnostic Trouble Codes at Event, fault number: 4	N/A
Diagnostic Trouble Codes at Event, fault number: 5	N/A
Diagnostic Trouble Codes at Event, fault number: 6	N/A
Maximum SDM Recorded Velocity Change (MPH)	0.68
Algorithm Enable to Maximum SDM Recorded Velocity Change (msec)	10
Driver First Stage Deployment Loop Commanded	No
Driver Second Stage Deployment Loop Commanded	No
Driver Side Deployment Loop Commanded	No
Driver Pretensioner Deployment Loop Commanded	Yes
Driver (Initiator 1) Roof Rail/Head Curtain Loop Commanded	No
Driver (Initiator 2) Roof Rail/Head Curtain Loop Commanded	No
Driver Knee Deployment Loop Commanded	No
Passenger First Stage Deployment Loop Commanded	No
Passenger Second Stage Deployment Loop Commanded	No
Passenger Side Deployment Loop Commanded	No
Passenger Pretensioner Deployment Loop Commanded	Yes
Passenger (Initiator 1) Roof Rail/Head Curtain Loop Commanded	No
Passenger (Initiator 2) Roof Rail/Head Curtain Loop Commanded	No
Passenger Knee Deployment Loop Commanded	No
Second Row Left Side Deployment Loop Commanded	No
Second Row Left Pretensioner Deployment Loop Commanded	No
Third Row Left Roof Rail/Head Curtain Loop Commanded	No
Second Row Right Side Deployment Loop Commanded	No
Second Row Right Pretensioner Deployment Loop Commanded	No
Third Row Right Roof Rail/Head Curtain Loop Commanded	No
Second Row Center Pretensioner Deployment Loop Commanded	No
Multiple Event Counter	0
An Event(s) Preceded the Recorded Event(s)	No
An Event(s) was in Between the Recorded Event(s)	No
An Event(s) Followed the Recorded Event(s)	No
The Event(s) Not Recorded was a Deployment Event(s)	No
The Event(s) Not Recorded was a Non-Deployment Event(s)	No
Crash Record Locked	No
Vehicle Event Data (Pre-Crash) Associated With This Event	Yes
Deployment Event Recorded in the Non-Deployment Record	No
Event Recording Complete	Yes
Estimated Principal Direction of Force (PDOF) degrees	N/A





Time (milliseconds)	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150
Longitudinal Axis Recorded Velocity	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Time (milliseconds)	160	170	180	190	200	210	220	230	240	250	260	270	280	290	300
Longitudinal Axis Recorded Velocity	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00





Time (milliseconds)	10	20	30	40	50	60	70	80	90	100	110	120	130	140	150
Lateral Axis Recorded Velocity Change (MPH)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Time (milliseconds)	160	170	180	190	200	210	220	230	240	250	260	270	280	290	300
Lateral Axis Recorded Velocity Change (MPH)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00



## Hexadecimal Data

This page displays all the data retrieved from the air bag module.  
It contains data that is not converted by this program.

```
$01 00 00 00 00 58 00 00
$02 30 00 00 00 00 00 00
$03 02 00 00 00 00 00 00
$04 02 00 00 00 00 00 00
$05 00 00 00 00 00 00 00
$06 00 0A 00 00 0A 72 78
$07 00 00 00 00 00 00 00
$08 50 2F 00 00 00 00 00
$09 00 7B 72 00 00 00 00
$0A 00 00 00 00 00 00 00
$0B 00 00 01 0F 00 00 00
$0C 80 00 80 00 00 00 00
$0D FF 62 C0 00 00 00 00
$0E 40 00 00 00 00 00 00
$0F A2 00 00 00 00 00 00
$10 47 31 5A 53 35 32 46
$11 30 35 46 31 32 39 32
$12 30 37 00 00 00 00 00
$13 00 00 00 00 00 00 00
$14 00 00 00 00 00 00 00
$15 00 00 00 00 00 00 00
$16 03 06 0C 16 34 00 00
$17 03 03 02 02 00 00 00
$18 00 07 00 00 00 00 00
$19 07 07 00 00 00 00 00
$1B 3F 30 00 67 00 7A 00
$1C 3F 00 00 06 00 18 00
$1D 00 00 00 00 00 00 00
$1E 4F 4F 00 00 00 00 00
$1F 20 00 00 00 00 00 00
$20 40 00 00 00 00 00 00
$21 FF 01 00 00 70 00 00
$22 00 8F 00 00 00 00 00
$24 00 00 00 00 00 00 00
$25 00 00 00 00 00 00 00
$26 00 00 00 00 00 00 00
$27 FF 00 FF 00 00 00 00
$2A 00 00 00 00 00 00 00
$2B 00 00 00 00 00 00 00
$2D 00 00 00 00 00 00 00
$2E 80 64 01 00 CF 00 00
$2F 00 FE 06 1D CF 00 00
$30 9D 00 00 00 00 00 00
$31 00 00 2E 2E 2E 00 00
$32 00 00 00 00 00 00 00
$33 13 25 6C 6C 6C 00 00
$34 1A 1F 1E 1E 1E 00 00
$35 54 5C 5D 5C 5C 00 00
$36 FF 00 00 00 00 00 00
$37 00 00 00 04 0B 00 E2
$38 49 00 C0 00 03 C0 00
$39 00 00 00 00 00 80 00
$3A 00 00 00 00 00 80 00
$3B 03 06 0C 00 00 00 00
$3C 00 00 00 00 00 00 C0
$3D 31 5A 53 35 32 46 00
$3E 35 12 92 07 00 00 00
$3F 00 00 90 00 00 00 00
$40 20 A5 00 00 00 00 00
$41 10 10 00 00 00 00 00
$42 00 F 0 05 46 00 00
```



```

$43 FE 05 4E 00 00 00 00
$44 00 00 00 00 00 00 00
$45 00 00 00 00 00 00 00
$46 00 00 00 00 00 00 00
$47 00 00 00 00 00 00 00
$48 00 00 00 00 00 00 00
$49 00 00 00 00 00 00 00
$4A 00 00 00 00 00 00 00
$4B 00 00 00 00 00 00 00
$4C 00 00 00 00 00 00 00
$4D 00 00 00 00 00 00 00
$4E 00 00 00 00 00 00 00
$4F 00 00 00 00 00 00 00
$50 00 00 00 00 00 00 00
$51 F0 00 00 00 00 00 00
$52 80 00 00 00 00 00 00
$53 01 00 01 00 00 00 00
$54 00 00 00 00 00 00 00
$55 00 00 00 00 00 00 00
$67 00 00 00 00 00 00 00
$68 F8 F8 90 C0 00 00 00
$69 80 FF FF FF FF 00 00
$6A FF FF FF 00 00 00 00
$6B FF FF FF FF FF FF 00
$6C FF FF FF FF FF FF 00
$6D FF FF FF FF FF FF 00
$6E FF FF FF FF FF FF 00
$6F FF FF FF FF FF FF 00
$70 FF FF FF FF FF FF 00
$71 FF FF FF FF FF FF 00
$72 FF FF FF FF FF FF 00
$73 FF FF FF FF FF FF 00
$74 FF FF FF FF FF FF 00
$75 FF FF FF FF FF FF 00
$76 FF FF FF FF FF FF 00
$77 FF FF FF FF FF FF 00
$78 F0 00 00 F0 00 00 00
$79 81 FF FF FF 00 00 00
$7A 82 FF FF 00 00 00 00
$7B FF FF FF FF FF FF 00

```

```

$01 41 55 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$02 01 02 03 04
$03 41 54 01 02 03 04 52 53 41 32 03 09 01 AA AA 01
$04 01 02 03 04
$05 42 55 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$06 FF FF FF FF
$07 42 54 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$08 FF FF FF FF
$0D 41 48 36 35 32 39 52 34 31 38 39 31 45 34 33 34
$0E 01 59 D3 B3
$0F 41 4A 36 35 32 39 52 34 31 38 38 33 45 33 59 43
$10 01 59 D3 B3
$13 42 52 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$14 FF FF FF FF
$17 42 54 FF FF FF FF FF FF FF FF FF FF FF FF FF FF
$18 FF FF FF FF
$21 31 12 66 1A D0 2E 91 9A
$22 72 78
$23 31 5A 53 54 55 55 32
$24 31 5A 53 54 55 55 32
$25 31 5A 53 54 55 55 32
$26 31 5A 53 54 55 55 32
$40 00 00
$41 3F 00 00 06 00 18
$42 10 C4
$43 00 00 8C 80

```



```
$44 C6 00 00 FC C0 C0
$45 07 01 07 01 05 01
$46 00 0F 0F 64 64
$47 0A 64 06 04 04 05 0A 06 04 0A 00 00 FA 00 00 FF 04 64
$48 18 08 08
$B0 58
$B1 FD FE 00
$B2 FF FF FF FF FF
$B4 41 53 37 32 37 38 32 33 30 45 4C 55 20 20 20 20
$B7 50 AA 01 0F 01
$B8 54 41 68 02 11
$C1 30 46 30 31
$CA 30 46 30 31
$CB 01 5A CA 6E
$CC 01 5A CA 6E
$D1 00 00
$DB 00 00
$DC 00 00
```



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
Vehicle Brand: Chevrolet Model: Malibu  
File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Mileage at Inspection: 14,601

Inspection Location: S&S Auto Body, 3 Camaro Ln,  
Carthage, TN 37030

Inspector's phone number: (706) 937-4683

Inspected By: Donald J. Hutelin, EAA

**Section 1 INSPECTION SUMMARY**

**BRIEFLY Describe the customer's ALLEGATION below:**

The customer stated she was driving along an Oiled Dirt and Gravel road, when the steering wheel started to make a noise, and then the steering wheel went haywire. The customer cut the steering wheel to the right to keep from going off the side of a hill, and the vehicle hit a tree.

**Following the inspection, summarize the facts and observations:** (Additional cmts may be placed in section 9)

The customer did not file a police report.

I called customer at both phone numbers for 6 days and was unable to contact customer. PAR authorized inspection without customer interview. The vehicle is equipped with manual steering. The Insurance Company instructed the body shop NOT to give me a copy of the body damage estimate. Body shop did let me look at it. Estimate was \$2,828.99. When I inspected the vehicle the body shop had the vehicle backed in a service bay and the front of the vehicle was on jack stands. Both front wheels/tires were removed. I am unable to confirm or deny that the wheels and tires I inspected were from the subject vehicle. I turned the steering wheel from full left to full right and the steering appeared to operate normally. I repeated this test several times with the same results each time.

**Section 2 INTERVIEW - INCIDENT DETAILS**

Obtain all of the information for this section from the Driver/Claimant

**Provide a complete description of the incident according to the DRIVER / CLAIMANT**

Interview mode: ☐ By Telephone ☐ In Person

Incident Date and Time: 3/25/2006, 1:00 PM

Interview date: No interview per PAR

Was a police/fire department report obtained? ☐ Yes ☒ No

Provide driver/claimant's description of incident. If there was a collision, describe all collision events; include description of other vehicles involved; describe all objects contacted and the sequence in which they were contacted. (Additional cmts may be placed in section 9)

The customer stated that she was driving on a Oiled/Dirt and Gravel road, Chaffin Lane, Chestnut Mount, TN when the steering wheel started to make a noise. The steering wheel went haywire. The customer turned the steering wheel to the right to keep from going off the side of a hill and the vehicle hit a tree. Customer states that the steering was uncontrollable when the accident occurred.

Driver/other occupant's physical description (include name, gender, height, weight, & disabilities ):

Tina Maggart, Female, height 5' 4", weight and disabilities unknown

If there was a collision:

Describe extent of any injuries to the Driver: Unknown

{

Describe where other occupants were seated & extent of any injuries: Unknown

{

{



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
Vehicle Brand: **Chevrolet** Model: **Malibu**  
File # **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

**What was the exact location of the incident? Chaffin Lane in Chester Mound, TN**

**Driving conditions at the time of the incident:**

Weather conditions & Visibility: **Clear** Approximate Temp (°F): **Unknown**

Road Surface: ☐ Concrete ☐ Asphalt ☒ Gravel ☐ Crushed rock ☒ Dirt  
 Road Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: {  
 Shoulder ☐ Curb ☐: ☐ Concrete ☐ Asphalt ☒ Gravel ☐ Crushed rock ☒ Dirt  
 Shoulder/Curb Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: {

Posted Speed Limit **Unknown**

Any objects in the road? (rocks, scrap metal, pothole, speed bump, etc.) **Unknown**

**Length of Drive Prior to incident:**

Total Time (hrs. & mins.): **Unknown** Distance (miles): **Unknown**

Estimate of vehicle speed: **30** mph Source of est. **Tina Maggart**

Estimated vehicle speed at impact: **30** mph Source of est. **Tina Maggart**

**(Do Not report speed information from the Vetronix data here)**

**If the driver/claimant description of the vehicle operation prior to and during the incident does not include the following information, please obtain it.**

<b>Steering</b>	<b>Normal</b> <input type="checkbox"/>	<b>Other</b> <input checked="" type="checkbox"/>	<b>Describe</b> The steering wheel started to make noise, then the steering wheel went haywire.
<b>Suspension</b>	<b>Normal</b> <input type="checkbox"/>	<b>Other</b> <input type="checkbox"/>	<b>Describe:</b> <b>Unknown</b>
<b>Brakes</b>	<b>Normal</b> <input type="checkbox"/>	<b>Other</b> <input type="checkbox"/>	<b>Describe:</b> <b>Unknown</b>
<b>Engine</b>	<b>Normal</b> <input type="checkbox"/>	<b>Other</b> <input type="checkbox"/>	<b>Describe:</b> <b>Unknown</b>
<b>Electrical</b>	<b>Normal</b> <input type="checkbox"/>	<b>Other</b> <input type="checkbox"/>	<b>Describe:</b> <b>Unknown</b>

**Were any warning lights illuminated or driver information center messages displayed?** ☐ Yes ☐ No If "Yes", get the details and describe the event(s). **Unknown**

Has the vehicle behavior noted during this incident ever been noted prior to this incident? ☐ Yes ☐ No If "Yes", get the details and describe the event(s). **Unknown**

Also, determine whether there were any warning lights illuminated, messages on driver information panel, unusual noises, smoke or steam observed. **Unknown**

Describe any evasive action: ☒ Turning ☐ Braking ☐ Accelerating ☐ Other: {

Describe cargo (in the vehicle interior, trunk and/or trailer (if any)): **None**

Estimated total weight of cargo: **N/A** Estimated weight of the trailer, if any. **N/A**

If a trailer was being towed, photograph the hitch structure, both on the trailer and towing vehicle.

Did the vehicle leave the roadway?: ☒ Yes ☐ No Describe: **Hit Tree**

Objects Impacted: **Hit tree**

How was the vehicle transported from the incident site to the present location? ☐ Tow Truck ☒ Flat Bed ☐ Other

Additional comments concerning the incident: **None**

{  
{



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
 Vehicle Brand: **Chevrolet** Model: **Malibu**  
 File #: **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

**Section 3****INTERVIEW - VEHICLE HISTORY**

Source of information (name, address, phone number, & relationship), if other than claimant:

**Claimant**

Comments: (Additional cmts may be placed in section 9)

**None**

Did the owner purchase the vehicle new? ☒ Yes ☐ No Date **11/05/05** Used? ☐ Yes ☐ No Date \_\_\_\_\_

**VEHICLE MODIFICATIONS / ALTERATIONS**

Are any vehicle modifications or alterations present, and has any after-market equipment been installed? (e.g., objects attached to the steering wheel or instrument panel, controls for disabled persons, shock absorbers, springs, modified body, electrical components, powertrain, wheels or tires, after-market seats, etc..) Describe:

**None**

{

{

**VEHICLE REPAIR / SERVICE HISTORY**

Prior electrical system service? ☒ No ☐ Yes If yes, describe: {

{

Prior collision repair? ☒ No ☐ Yes If yes, describe: {

{

Repaired by whom? (name, address, phone) **N/A**

{

Prior chassis system service, repair, or replacement? ☒ No ☐ Yes If yes, describe what was done:

{

Prior electrical system components serviced, repaired, or replaced by whom? ( name, address, phone number)

**None**

Any other pertinent vehicle history information (from interview, GM warranty or dealership history files)? ☒ No ☐ Yes

If yes, describe: {

{

**Section 4****VEHICLE INSPECTION – VISUAL/PHOTO**

**THE VEHICLE VISUAL INSPECTION DOCUMENTS THE PHYSICAL EVIDENCE USING PHOTOS AND WRITTEN OBSERVATIONS. RECORD YOUR OBSERVATIONS IN THE APPROPRIATE SECTION.**

**PHOTOGRAPH THE EXTERIOR OF THE VEHICLE AS FOLLOWS: VIN PLATE, QUARTER VIEWS FROM LEFT FRONT, RIGHT REAR ARE REQUIRED, AND DOCUMENT FURTHER EXTERIOR DAMAGE WITH MANY PHOTOS.**

**DESCRIBE ANY DAMAGE TO THE VEHICLE BODY:**

The vehicle hit an object with the RF corner of the vehicle. The RF headlight was damaged, the front bumper cover was damaged, the RF fender was damaged, the front air dam was damaged, and the RF wheel was damaged.

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**UNDERBODY / FRAME / CHASSIS AREA:** Describe any damage to the underside of the vehicle. Note the condition of the bumpers, frame, suspension, tires, wheels, brake and fuel lines & engine mount(s)/crossmember. Photograph and comment on any contact between vehicle components and the underbody. Photograph if damage is present.

**There are witness marks on the underside of the RF frame rail and the rear of the RF inner fender. The RF strut is damaged. The RF control arms are bent.**

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{



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
 Vehicle Brand: **Chevrolet** Model: **Malibu**  
 File #: **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

{ \_\_\_\_\_

**CORNER ASSEMBLIES**

Struts/shocks **Damaged** Ball joints Tire/wheel assemblies **RF wheel**  
**damaged,**  
 Springs Steering knuckles  
 Control arms Axle assemblies

Comments: **None**

{ \_\_\_\_\_

**UNDERHOOD**

Engine compartment Power steering lines, hoses, clamps and connections  
 Brake fluid level and condition Power steering fluid level and condition

Comments:

**Vehicle not equipped with power steering**

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**GENERAL OBSERVATIONS**

Photograph and comment on any aftermarket equipment found, vehicle modifications or items that are unusual or out of place.

Comments:

**None**

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**Section 5**

**VEHICLE INSPECTION - PASSENGER COMPARTMENT**

**INTERIOR**

Instrument panel Odometer  
 Controls Steering wheel and column  
 Overall view of seat position Driver and passenger seat back angle (inclinometer measurement)  
 Photo of options label-glove box/trunk Sunvisors and headliner  
 Personal items/cargo

**INTERIOR INSPECTION** (Describe any damage and photograph )

**No interior damage**

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**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

<u>Customer's Name:</u>	<b>(REDACTED)</b>	<u>Inspection Date:</u>	<b>4/13/2006</b>
<u>Vehicle Brand:</u>	<b>Chevrolet</b>	<u>Model:</u>	<b>Malibu</b>
<u>File #</u>	<b>1-401424761</b>	<u>VIN:</u>	<b>1G1ZS52F05FXXXXXX</b>

**Section 6****STEERING, SUSPENSION, TIRE AND WHEEL SYSTEM INSPECTION**

Use the following table to identify what you did and what you found during the inspection. Identify the tests and test results for the applicable items. Describe anything relevant to the allegation that is not in normal working condition, does not function properly or is a non production part. Take appropriate photographs.

**When I arrived at the body shop the vehicle was backed in a service bay. The front of the vehicle was on jack stands and the front wheel/tire assembly's had been removed.**

**During my visual inspection I found that there were witness marks on the underside of the right frame rail. There were witness marks on the leading edge of the rear of the RF inner fender.**

**When I measured the wheelbase the right side was three inches shorter than the left.**

**There were witness marks on the RF strut.**

**The RF control arms were bent. The insurance company told the body shop not to give me a copy of the estimate. The body shop did allow me to look at it and the body shop included the control arms and RF strut in their estimate.**

**I examined the steering linkage and there were no signs of damage. I turned the steering wheel lock to lock and the steering moved the brake rotor assemblies easily with no sign of binding. This vehicle has manual steering.**



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
Vehicle Brand: **Chevrolet** Model: **Malibu**  
File # **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

ITEM	OBSERVATIONS/TEST RESULTS
Steering system-Are all components in place and connected in a normal manner? Can the steering wheel be rotated lock to lock with appropriate movement of the front wheels. Is there any binding, sticking or uneven feel?	<b>All components appear to be in place and connected in a normal manner. The steering wheel can be rotated lock to lock and the front brake rotors appear to move in the appropriate manner. There did not appear to be any binding, sticking or uneven feel.</b>
Steering linkage-Is the linkage free from cracks, bends, fractures, etc. Are there any scrapes, abrasions, signs of contact with any of the linkage?	<b>The steering linkage appears to be free from cracks, bends, and fractures. There were no abrasions or contact on the steering linkage</b>
Gear/rack and pinion-Any sign of leakage, damage to boots on the rack, contact by foreign objects?	<b>There did not appear to be any leakage or damage to the boots on the rack. There did not appear to be any contact by foreign objects.</b>
Steering column, ignition switch, intermediate shaft. Does the column unlock with the ignition key "on"? Is the steering column properly fastened to the dash?	<b>The steering column, ignition switch, intermediate shaft unlocks with the ignition key on. The steering column appears to be properly fastened to the dash.</b>
Steering pump, drive, hoses, connections, flow, pressure. If possible, start the engine and rotate the steering wheel lock to lock. Is power assist normal? If not, it may be necessary to check pressure and flow.	<b>Vehicle equipped with manual steering.</b>
PS fluid level and condition-Color, contamination, odor	<b>N/A</b>
Steering knuckle-All attachments secure and proper?	<b>Yes</b>
Suspension components – LF Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. Sway bars properly attached.	<b>Yes</b>
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. RF	<b>Suspension parts appear to be properly attached. RF control arms appear to be bent.</b>
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc Rear sway bars,	<b>Yes</b>



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
Vehicle Brand: **Chevrolet** Model: **Malibu**  
File # **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

trailing arms properly attached and undamaged. LR	
Strut attachments, springs intact; control arms properly attached, deformed, broken, scraped, etc. RR	<b>Yes</b>
Rear axle assembly-deformed, signs of impact, properly located, etc.	<b>No</b>
Deformation to the frame	<b>No</b>
Describe and photograph evidence of axle/ suspension/ tire contact with frame, body or components	<b>RF tire contact with inner fender, photographed.</b>
Describe and photograph contact of the under- carriage with the road surface (road, shoulder, curb, or grass)	<b>Witness marks on the lower RF frame rail. Photographed.</b>
Stability Enhancement system/components-check for codes with Tech II	<b>N/A</b>
Engine (normal, other)-Obtain codes using a Tech II.	<b>Tech II not used</b>
Electrical (normal, other)	<b>Electrical appears normal</b>
Warning lights/messages displayed? Describe and obtain codes using a Tech II	<b>Tech II not used</b>
Anything components missing?	<b>No</b>
Other	<b>N/A</b>

If the vehicle is driveable, conduct a road test to evaluate the concern expressed by the customer. Describe the results of the road test. If the concern is observed during the road test, it would be desirable to get a Tech II "snapshot". **Vehicle not drivable.**

{

If the vehicle is equipped with an ABS/Traction Control/Stability Enhancement System, use a Tech II to obtain any codes stored as current and/or history. Document via photos and include the code description. Follow the procedures in the service manual to determine the cause of each stored code which relates to the allegation. State which procedures were followed, record results of each test and state the root cause of each code. Consult with the CRM or Team Manager of the PAR group if this process leads to a disassembly of components. Follow the procedure in the General Guidelines for parts that need to be assembled for evaluation.

Inspect the system wiring, connections and components for damage. Note if the damage was the result of the incident.

**TIRE AND WHEEL INSPECTION**



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
 Vehicle Brand: **Chevrolet** Model: **Malibu**  
 File #: **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

1. IDENTIFICATION:

	TIRE BRAND	TIRE TYPE	TIRE SIZE	PRESSURE	AVE. TREAD DEPTH	DOT Numbers
	(Goodyear)	(Eagle GA)	(P205/70R15)	(psi)	32nds of inch	
LF	<u>Bridgestone</u>	<u>B456</u>	<u>P205/65R15</u>	<u>27</u>	<u>5</u>	<u>92S</u>
RF	<u>Bridgestone</u>	<u>B456</u>	<u>P205/65R15</u>	<u>Flat</u>	<u>5</u>	<u>92S</u>
LR	<u>Bridgestone</u>	<u>B456</u>	<u>P205/65R15</u>	<u>28</u>	<u>5</u>	<u>92S</u>
RR	<u>Bridgestone</u>	<u>B456</u>	<u>P205/65R15</u>	<u>28</u>	<u>5</u>	<u>92S</u>

Note: DOT numbers may be found on the inside of each tire adjacent to the rim.

Describe and photograph any damage to tires and wheels, such as scrapes, marks due to impact, cuts, tread separation, flat spots, bead separation, embedded grass/dirt, etc. Photographs should include inner and outer views of the damaged tire/wheel assemblies with chalk marks on each assembly to denote position on vehicle (RF, LF, RR and LR).

LF None

RF Rim bent, tire flat

LR None

RR None

2. TIRE PLACARD DATA:

Record the following data: (located on driver's door edge or inside the decklid)

	<u>SIZE</u>	<u>PRESSURE (psi)</u>	<u>PRESSURE AT MAXIMUM LOAD(psi)</u>
TIRES	<u>P205/65R15</u>	<u>30</u>	<u>      </u>
SPARE TIRE	<u>      </u>	<u>      </u>	<u>      </u>

Section 7

**SITE INSPECTION**

**SITE INSPECTION - PERFORM THE FOLLOWING IF ADDITIONAL INFORMATION MAY BE FOUND:**

- Check the incident scene for tire marks, gouges in the pavement, debris, or any other marks. Measure location and photograph.
- Identify evidence of whether the vehicle left the road prior to, during, or after the incident. Document all locations, distances, stationary objects (guard rails, telephone poles, fences, buildings, etc), nearest posted speed limit signs in the direction of travel, etc...
- Identify evidence & photograph any object struck by the vehicle on or off the road prior to, during or after incident.
- Inspect roadway & shoulder surfaces in the area of the incident site for telltale signs of loss of control, excessive speed, severe braking, etc.

**Photograph the scene and property if involved.**



**PRODUCT ALLEGATION RESOLUTION  
PRELIMINARY INSPECTION  
STEERING, SUSPENSION, AXLE, TIRE AND WHEEL SYSTEMS**

Customer's Name: **(REDACTED)** Inspection Date: **4/13/2006**  
Vehicle Brand: **Chevrolet** Model: **Malibu**  
File # **1-401424761** VIN: **1G1ZS52F05FXXXXXX**

**Comments:****None**

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**Section 8****COMMENT OVERFLOW**

**Please use this page if needed for additional comments from the inspection form. Please note the section and area the comments are continued from prior to each comment.**

**None**

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**Section 9****OTHER REPORT INFORMATION****Check here if there was evidence of a "Fire-Related" event.**

According to NHTSA, "fire" means combustion or burning of material in or from a vehicle as evidenced by flame. The term also includes, but is not limited to, thermal events and fire-related phenomena such as smoke, sparks or smoldering, but does not include events and phenomena associated with a normally functioning vehicle, such as combustion of fuel within an engine or exhaust from an engine.

**Attachments: (Check all that apply)**

**X Photographs**      **X Data Downloads**      ☐ **Other Records**



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Mileage at Inspection: 14,601

Inspection Location: S&S Auto Body, 3 Camaro Lane  
Carthage, TN 37030

Inspector's phone number: 706 937-4683

Inspected By: Donald J. Hutelin, EAA

## Section 1

**INSPECTION SUMMARY - RESTRAINT SYSTEM****Describe the SIR-related allegation below:**

- ☐ Non-deployment (the airbag did not deploy and the claimant states that it *should* have)  
☐ Inadvertent deployment (the claimant states that the airbag deployed when it *should not* have)  
☐ Improper deployment (e.g. the claimant states that the airbag deployed late or only partially)  
☐ Inflation or deployment-induced injury (the claimant states the deployment of the airbag caused an injury)  
☒ Other Describe: **Steering complaint**  
☐ None; Seat belt - related allegation only

**NOTE: IF THE SIR ALLEGATION IS NON-DEPLOYMENT OF SIDE IMPACT BAGS, COMPLETE THE ADDENDUM AND ATTACH TO THIS FORM.**

**Describe the seat belt-related allegation below:**

- ☐ Non-activation (the seat belt did not restrain an occupant and the claimant states it *should* have)  
☐ Induced injury (the claimant states the seat belt system caused an injury)  
☒ Other Describe: **Steering complaint**  
 None; SIR - related allegation only

**Following the inspection, summarize the facts and observations:** (Additional cmts may be placed in section 9)

The customer did not file a police report.

I called customer at both phone numbers for 6 days and was unable to contact customer. PAR authorized inspection without customer interview. The vehicle is equipped with manual steering. The Insurance company instructed the body shop NOT to give me a copy of the body damage estimate. Body shop did let me look at it. The estimate was \$2,828.99. When I inspected the vehicle the body shop had the vehicle backed in a service bay and the front of the vehicle was on jack stands. Both front wheels/tires were removed. I am unable to confirm or deny that the wheels and tires I inspected were from the subject vehicle. I turned the steering wheel from full left to full right and the steering appeared to operate normally. I repeated this test several times with the same results each time.

## Section 2

**INTERVIEW - INCIDENT DETAILS****Provide a complete description of the incident according to the DRIVER / CLAIMANT**Interview mode: ☐ By Telephone ☐ In Person

Incident Date and Time: 3/25/2006, 1:00 PM

Interview date: No interview obtained.

Was a police/fire department report obtained? ☐ Yes ☒ No

Provide driver/claimant's description of incident. Describe all collision events; include description of other vehicles involved; describe all objects contacted and the sequence in which they were contacted. (Additional cmts may be placed on pg 9)

The customer stated that she was driving on a Oiled/Dirt and Gravel road, Chaffin Lane, Chestnut Mount, TN when the steering wheel started to make a noise. The steering wheel went haywire. The customer turned the steering wheel to the right to keep from going off the side of a hill and the vehicle hit a tree. Customer states that the steering was uncontrollable when the accident occurred.

Driver/other occupant's physical description (include name, gender, height, weight, &amp; disabilities ):

Tina Maggart, Female, height 5'4", weight unknown, disabilities none.

Describe extent of any injuries to the Driver: Unknown,

Confidential GM/PAR



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File #: 1-401424761 VIN: 1G1ZS52F05FXXXXXX

{  
 Describe where other occupants were seated & extent of any injuries: **Unknown**  
 {  
 {

Weather conditions & Visibility: **Unknown** Approximate Temp (°F): **Unknown**  
 Road Surface: ☐ Concrete ☐ Asphalt ☒ Gravel ☐ Crushed rock ☒ Dirt  
 Road Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: {  
 Shoulder ☐ Curb ☐: ☐ Concrete ☐ Asphalt ☒ Gravel ☐ Crushed rock ☒ Dirt  
 Shoulder/Curb Condition: ☒ Dry ☐ Wet ☐ Icy ☐ Other: {

**Length of Drive Prior to incident:**

Total Time (hrs. & mins.): **Unknown** Distance (miles): **Unknown**

Estimate of vehicle speed: **30** mph Source of est. **Tina Maggart**

Estimated vehicle speed at impact: **30** mph Source of est. **Tina Maggart**

**(Do not report speed information from Vetronix data)**

Describe any evasive action: ☒ Turning ☐ Braking ☐ Accelerating ☐ Other: {

Describe cargo and/or trailer (if any): **None**

Estimated total weight of cargo & Trailer (lbs): **N/A**

Any objects in the road? (rocks, scrap metal, pothole, speed bump, etc.) **Unknown**

Did the vehicle leave the roadway?: ☒ Yes ☐ No Describe: **Hit a tree**

Objects Impacted: **Tree**

How was the vehicle transported from the incident site to the present location? ☐ Tow Truck ☒ Flat Bed ☐ Other

Additional comments concerning the incident: **None**

**Section 3 INTERVIEW - VEHICLE HISTORY**

Source of information (name, address, phone number, & relationship if other than claimant):

**Claimant statement to PAR**

Comments:

**None**

Did the owner purchase the vehicle new? ☒ Yes ☐ No Date **11/05/2005** Used? ☐ Yes ☐ No Date

**VEHICLE MODIFICATIONS / ALTERATIONS**

Are any vehicle modifications or alterations present, and has any after-market equipment been installed? (e.g., objects attached to the steering wheel or instrument panel, controls for disabled persons, cellular phone, modified body, electrical components, powertrain, suspension, wheels or tires, after-market seats, etc.) Describe:

**None**

**VEHICLE REPAIR / SERVICE HISTORY**

Prior electrical system service? ☒ No ☐ Yes If yes, describe: {

{

Prior collision repair? ☒ No ☐ Yes If yes, describe: {

{

Repaired by whom? (name, address, phone) **N/A**

{

Prior SIR and/or seat belt service, repair, or replacement? ☒ No ☐ Yes If yes, describe what was done:

{

SIR / airbag and/or seat belt system serviced, repaired, or replaced by whom? ( name, address, phone number)

**No**



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Any other pertinent vehicle history information (from interview, GM warranty or dealership history files)? ☒ No ☐ Yes  
 If yes, describe: N/A

{

## Section 4

**VEHICLE INSPECTION - EXTERIOR**

**PHOTOGRAPH THE EXTERIOR OF THE VEHICLE AS FOLLOWS: VIN PLATE, QUARTER VIEWS FROM LEFT FRONT, RIGHT REAR, ARE REQUIRED AND DOCUMENT FURTHER EXTERIOR DAMAGE WITH MANY PHOTOS.**

**FRONT AREA:** Describe **any damage** to the front of the vehicle. Note (and photograph) if the hood is opened, if it contacted or penetrated the windshield, and the location of the contact:

The vehicle apparently struck an object with the RF corner of the vehicle. The RF headlight was damaged, the front bumper cover was damaged, the RF fender was damage , the front air dam was damaged, the RF tire was flat, and the RF wheel is damaged.

**LEFT SIDE EXTERIOR:** Describe **any damage** to the door(s). Note if any door opened as a result of the impact and photograph both the latch, striker and the hinges.

None

{

**RIGHT SIDE EXTERIOR:** Describe **any damage** to the door(s). Note if any door opened as a result of the impact and photograph both the latch, striker and the hinges.

None

{

**REAR AREA:** Describe **any damage** to the rear of the vehicle. Note (and photograph) if the deck lid or rear hatch opened, and note if the spare tire separated from the vehicle.

None

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**ROOF / ROOF STRUCTURE:** Describe **any damage** to the roof of the vehicle. Note if any convertible tops or removable roof panels did not remain attached, and photograph the latches.

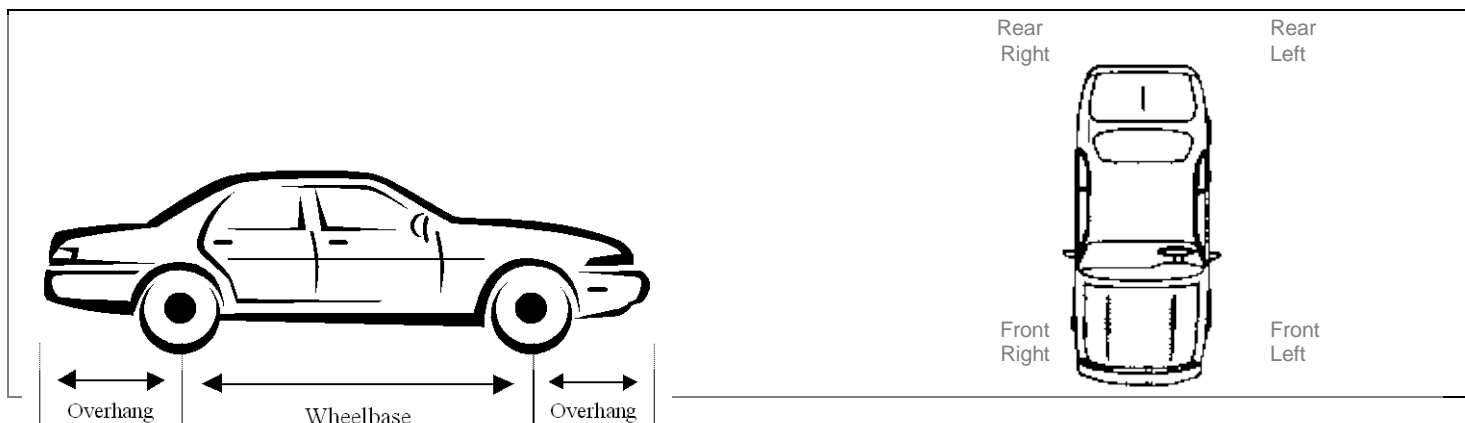
None

{

**UNDERBODY / FRAME / CHASSIS AREA:** The underbody should be carefully inspected and **any damage** to the underside of the vehicle completely described. Note the condition of the bumpers, frame, suspension, tires, wheels, & engine mount(s)/crossmember. This area of the vehicle is especially important when inadvertent deployment is alleged. Photograph any damage or signs of impact to the underbody.

**Witness marks on underside of RF frame rail, rear of RF inner fender. RF shock tower damaged. Front control arms bent.**

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**STRUCTURAL DEFORMATION - CRUSH AREAS**



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

(Please check all that apply)

Type of impact(s) ☒ Frontal ☐ Side ☐ Rear ☐ Rollover ☐ Other: {\_\_\_\_\_}

The following dimensions should be obtained as they are important to determining the magnitude of the impact to the vehicle. See diagram for definitions of overhang. Do not report "No Change" in this section.

Driver side: Wheelbase (in.) **106** Passenger side: Wheelbase (in.) **103**  
 Front overhang (in.) **36** Front overhang (in.) **36**  
 Rear overhang (in.) **40** Rear overhang (in.) **40**

Maximum depth of crush: **0** Inches - Front **0** Inches - Driver side  
 { **0** Inches - Rear **4** Inches - Passenger side  
 { **0** Inches - Roof

Additional comments concerning exterior damage: **None**

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**PRIOR DAMAGE**

Describe any existing damage that appears to have been present prior to this incident:

**None visible**

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**Section 5****VEHICLE INSPECTION - PASSENGER COMPARTMENT**

**INTERIOR INSPECTION** (Photograph the side view of the steering wheel and column, any damage to the interior and deployed airbags)

Interior reduced in size?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Where? {_____
Intrusion by external object?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Loose objects inside?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Cowl deformed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Floorpan/toe pan deformed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Headliner/visors damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Inside rear-view mirror damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Door trim damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Windshield (W/S) damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Cracked <input type="checkbox"/> Broken (Torn Inner Layer)

W/S perimeter separated from vehicle? ☒ No ☐ Yes { \_\_\_\_\_ % - Approximate % of perimeter separation  
 Steering wheel damage? ☒ No ☐ Yes ☐ Rim ☐ Hub Describe: {\_\_\_\_\_

Indicate the "clock" position of the damage if present on the steering wheel: **12:00** (Note - the top of the steering wheel assembly is 12 o'clock, regardless if the wheel itself is turned)

Tilt steering wheel?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	Position: <input type="checkbox"/> Low <input checked="" type="checkbox"/> Mid <input type="checkbox"/> High
Steering column displaced?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Steering column capsule bracket displaced?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Control Knobs/levers damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Accelerator / brake pedal(s) deformed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Instrument Panel damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Lower I/P - knee bolster damaged?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Describe: {_____
Driver Frontal airbag deployed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Not equipped If "Yes", take photos of any witness marks.
Passenger Frontal airbag deployed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Not equipped If "Yes", take photos of any witness marks.
Passenger Frontal airbag Suppression switch (if equipped)	On <input type="checkbox"/> Off <input type="checkbox"/>	Photograph the switch.
Driver side-airbag deployed?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Not equipped If "Yes", take photos of any witness marks.
Passenger side-airbag deployed?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Not equipped If "Yes", take photos of any witness marks.
Roof Rail airbag deployed?	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input checked="" type="checkbox"/> Not equipped If "Yes", take photos of any witness marks.



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Additional comments concerning any interior damage:

None

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**SEAT INSPECTION** (Photograph damaged areas)

Type of Front Seat: ☒ Bucket ☐ Bench ☐ 50/50 Split Bench ☐ 60/40 Split Bench

**DRIVER'S SEAT INFORMATION**

Seat damaged? ☒ No ☐ Yes ☐ Cushion ☐ Backrest  
 Seat position? ☐ Forward ☐ Middle ☒ Rearward ☐ Tilted/Reclined  
 Seat back struck by rear occupant? ☒ No ☐ Yes Describe:\_{

**RIGHT FRONT PASSENGER SEAT INFORMATION**

Seat damaged? ☒ No ☐ Yes ☐ Cushion ☐ Backrest  
 Seat position? ☐ Forward ☐ Middle ☒ Rearward ☐ Tilted/Reclined  
 Seat back struck by rear occupant? ☒ No ☐ Yes Describe:\_{

Additional comments concerning any seat damage (front or rear):\_{

None

**WINDOW INSPECTION** (Note window condition and any unusual conditions observed)

All windows closed. No broken windows

**Section 6 RESTRAINT SYSTEM INSPECTION - SIR / Airbag**

**If the vehicle is not equipped with airbags, SKIP THIS SECTION**

**Note - Do Not "Clear Codes" from the on-board computer(s)**

**Describe the SIR-related allegation below:**

- ☐ Non-deployment (the airbag did not deploy and the claimant states that it *should* have)  
☐ Inadvertent deployment (the claimant states that the airbag deployed when it *should not* have)  
☐ Improper deployment (e.g. the claimant states that the airbag deployed late or only partially)  
☐ Inflation or deployment-induced injury (the claimant states the deployment of the airbag caused an injury)  
☒ Other Describe: **Steering complaint.**  
☐ None; Seat belt - related allegation only

**Alleged SIR Unit(s):**

☒ Driver Frontal ☒ Passenger Frontal ☐ Driver Side (door/seat) ☐ Passenger Side (door/seat)  
☐ Roof rail airbag

**Which SIR(s) deployed?**

☐ Driver Frontal ☐ Passenger Frontal ☐ Driver Side (door/seat) ☐ Passenger Side (door/seat)  
☐ Roof rail airbag ☒ None



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Was Vetronix CDR used? ☒ Yes ☐ No

Describe airbag light functional test results. When I turned the ignition key on the airbag light turned on and blinked two times and stayed on. I repeated this test 4 times with the same results each time.

{  
 {

Describe any diagnostic (current or history) trouble codes (if Tech 2 was used): Tech 2 not used

{  
 {

Describe any evidence that the passenger compartment may have been flooded or the SDM/DERM has incurred any damage due to moisture. (Inspect the carpet, floor pan for moisture and SDM/DERM electrical connector male and female ends for signs of corrosion.)

No evidence of flooding

{

If any airbag(s) deployed, was the:

**DRIVER AIRBAG**

Bag material cut/torn? ☐ No ☐ Yes

Describe: {

Transfer marks present - clothing, makeup, etc.? ☐ No ☐ Yes

Describe: {

**PASSENGER AIRBAG**

Bag material cut/torn? ☐ No ☐ Yes

Describe: {

Transfer marks present - clothing, makeup, etc.? ☐ No ☐ Yes

Describe: {

**DRIVER SIDE AIRBAG**

Bag material cut/torn? ☐ No ☐ Yes

Describe: {

Transfer marks present - clothing, makeup, etc.? ☐ No ☐ Yes

Describe: {

**PASSENGER SIDE AIRBAG**

Bag material cut/torn? ☐ No ☐ Yes

Describe: {

Transfer marks present - clothing, makeup, etc.? ☐ No ☐ Yes

Describe: {

**ROOF RAIL AIRBAG**

Bag material cut/torn? ☐ No ☐ Yes

Describe: {

Transfer marks present - clothing, makeup, etc.? ☐ No ☐ Yes

Describe: {

**PHOTOGRAPH THE STEERING WHEEL**

Was the steering wheel damaged? ☐ No ☐ Yes

Describe: {

Were transfer marks present ☐ No ☐ Yes

Describe: {

- clothing, makeup, etc.?

**INSPECT SIR WIRING, SENSORS**

SIR Wiring damaged? ☐ No ☐ Yes

Describe: {

SIR Sensors damaged or disconnected? ☐ No ☐ Yes

Describe: {

SIR Inflator module(s) disconnected? ☐ No ☐ Yes

Describe: {

**DERM / SDM Download**

- Obtain either DERM (Diagnostic Energy Reserve Module) or SDM (Sensing and Diagnostic Module) downloads.
- OBTAIN DERM / SDM DOWNLOAD FOR ALL SEAT BELT AND/OR SIR-RELATED ALLEGATIONS
- DO NOT CLEAR CODES PRIOR TO OBTAINING THE DOWNLOAD
- DO NOT CYCLE IGNITION KEY ON/OFF PRIOR TO OBTAINING THE DOWNLOAD



**RESTRAINT SYSTEMS SIR / SEAT BELTS**

Customer's Name: (REDACTED) Inspection Date: 4/13/2006  
 Vehicle Brand: Chevrolet Model: Malibu  
 File # 1-401424761 VIN: 1G1ZS52F05FXXXXXX

Download Available? ☒ Yes ☐ No If NO, describe reason: {  
 Download obtained from: ☒ ALDL / DLC ☐ Direct from the module (using adapter cables with the Vetronix CDR)  
 Download obtained using: ☒ Vetronix CDR (Save the file as a CDR file and a PDF type file)

If the download was obtained directly from the module, was the module removed from the vehicle? ☐ Yes ☐ No  
 If removed from the vehicle, describe the conditions under which the module was mounted when the download was obtained.

N/A

Additional comments concerning the airbags: **None**

**Section 7 RESTRAINT SYSTEM INSPECTION - Seat Belts****Describe the seat belt-related allegation below:**

- ☐ Non-activation (the seat belt did not restrain an occupant and the claimant states it *should* have)  
☐ Induced injury (the claimant states the seat belt system caused an injury)  
☒ Other Describe: **Steering complaint**  
☐ None; SIR - related allegation only THE SEAT BELTS SHOULD BE INSPECTED IF A COLLISION OCCURRED, AND SHOULD BE COMPLETED FOR THE SEAT BELT(S) POSITIONS FOR ALL OCCUPANTS AT THE TIME OF COLLISION.

**Location of seat belt to be inspected?**

☐ Other: { ☒ Driver ☐ Center front ☒ Right front  
☐ Driver's side rear ☐ Center rear ☐ Right rear

**Is the seat belt fully retracted?** ☒ Yes

☐ No **IF THE ANSWER IS NO, DO NOT DISTURB BELTS AT THIS TIME.**  
 - Secure webbing, measure length, photograph **36** Inches

Turn on ignition, observe seat belt light. On? ☒ Yes ☐ No  
 Buckle driver's seat belt. Seat belt light on? ☐ Yes ☒ No

**Photograph:**

- The overall belt assembly
- All visible components of the seat belt system and anchor points
- Identify and photograph the following items:

If so equipped, are the pretensioners activated (deployed)? ☒ No ☐ Yes  
 Does the webbing spool in and out freely? If no, which one does not? ☐ Lap ☐ Shoulder ☐ Both ☒ No ☐ Yes  
 Note: Do not use excessive force (Use less than 5 pounds of pressure)  
 Marks, cuts or debris on shoulder and lap belt webbing? ☒ No ☐ Yes  
 (If there are any of the above found, use photographs to document the position of the anomaly using a ruler or scale to show location relative to the buckle.)  
 Webbing energy management loops (if equipped) - stitches pulled free, unfolded, replacement/warning label exposed? ☒ No ☐ Yes  
 Tack stitch separated from plastic sleeve? ☒ No ☐ Yes  
 Seat belt webbing cut? (If yes, photograph and record length of pieces) { \_\_\_\_\_ Inches  
 Guide loop assembly - striations, bent, or deformed? ☒ No ☐ Yes  
 Guide loop adjuster functional (if equipped)? ☐ No ☒ Yes  
 Buckle and latch functional together (latched)? ☐ No ☒ Yes  
 Buckle condition (worn, or foreign material present)? ☒ No ☐ Yes  
 Plastic covers and/or guides damaged? ☒ No ☐ Yes  
 Does the seat belt return to the stowed position? ☐ No ☒ Yes  
 Any components missing? ☒ No ☐ Yes



**X** No ☐ Yes

Do the retractors on the belt being inspected appear to lock and hold properly? ☐ No ☒ Yes

—

Additional comments concerning seat belts:

**The seat belt answers above, were for the driver's seat belt. The RF passenger seat belt answers were the same except the shoulder belt was locked in the retracted position.**

## SITE INSPECTION

Carefully consider the facts in the case and then document the basis of your decision concerning whether to inspect the site of the incident. General Motors prefers site inspections as noted on the assignment sheet. If an inspection of the site is done, it is important to move quickly so that valuable information is not lost.

**I was unable to locate the exact site to do an inspection/**

**SITE INSPECTION - PERFORM THE FOLLOWING IF ADDITIONAL INFORMATION MAY BE FOUND:**

- Check the incident scene for tire marks, gouges in the pavement, debris, or any other marks. Measure location and photograph.
- Identify evidence of whether the vehicle left the road prior to, during, or after the incident. Document all locations, distances, etc...
- Identify evidence & photograph any object struck by the vehicle on or off the road prior to, during, or after incident.
- Inspect roadway & shoulder surfaces in the area of the incident site for telltale signs of loss of control, excessive speed, severe braking, etc.

**Photograph the scene and any property involved.**

**Comments:**

None

[illegible]



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Section 9	Comment Overflow Sheet
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None

[illegible]

Section 10	Other Report Information
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- ☐ Check here if there was evidence of a “Fire-Related” event.  
According to NHTSA, “fire” means combustion or burning of material in or from a vehicle as evidenced by flame. The term also includes, but is not limited to, thermal events and fire-related phenomena such as smoke, sparks or smoldering, but does not include events and phenomena associated with a normally functioning vehicle, such as combustion of fuel within an engine or exhaust from an engine.

☒ Photographs    ☒ Data Downloads    ☐ Other Records





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GENERAL MOTORS BUSINESS RESOURCE CENTER

VIA FAX ONLY

April 11, 2006

**INFORMATION Redacted PURSUANT TO THE FREEDOM OF  
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)**

Randy Hill  
Chuck Nickolson  
135 West Broadway  
Dover, OH 44622

Re:

Siebel Request: 1-404322504  
2005 Pontiac G6  
VIN # 1G2ZG528954

Dear: Mr. Randy Hill

This is a letter of notification regarding a Better Business Bureau case involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

April Enriquez  
BRC Customer Relationship Manager  
Ph# 866-790-5600 extension 11199  
FAX# 866-432-1683





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VIA FAX ONLY

**INFORMATION Redacted PURSUANT TO THE FREEDOM OF  
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)**

April 11, 2006

Terry Smith  
Chuck Nickolson  
Dover, OH 44622

Re:

[REDACTED]  
Siebel Request: 1-404322504  
2005 Pontiac G6  
VIN # 1G2ZG528954 [REDACTED]

Dear Mr. Terry Smith:

This is a letter of notification regarding a {Better Business Bureau case/State case} involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

April Enriquez  
BRC Customer Relationship Manager  
Ph# 866-790-5600 extension 11199  
FAX# 866-432-1683



# INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

November 15, 2010

[REDACTED]  
Aiken, SC [REDACTED]

Service Request: 1-405509837

Customer Relationship Manager: Hollie McIntyre

Dear [REDACTED]

We are sorry you continue to be dissatisfied with the decision we made concerning your 2006 Chevrolet Malibu. We know you are sincere in the position you have taken, and we trust we have been able to explain our point of view.

In circumstances such as these, General Motors believes that our customers should have the opportunity to deal with unresolved matters in a fast, fair and free dispute resolution process. For that reason, we participate in the Better Business Bureau's BBB AUTO LINE program, an independent dispute resolution process administered by the Council of Better Business Bureaus. BBB AUTO LINE provides mediation and arbitration for eligible warranty-related disputes.

As a GM customer, BBB AUTO LINE is available to you at no cost. In certain circumstances, you may be required to use this program prior to participation in other resolution methods. The BBB AUTO LINE program is discussed in your vehicle's "Warranty and Owner Assistance Information Booklet."

To file your case with BBB AUTO LINE, or get more information about the program, call the BBB at 1-800-955-5100 (Monday through Friday during normal business hours). You may also access the BBB AUTO LINE website at any time (including evenings, weekends and holidays) by visiting <<http://www.dr.bbb.org/goauto>>

Whether you contact them by telephone or Internet, the BBB will provide you with full program details, current eligibility standards of the BBB AUTO LINE program and will assist you with any questions you have.

Thank you for the opportunity to review this matter.

Sincerely,

Chevrolet Division  
General Motors Corporation



November 15, 2010

[REDACTED]  
[REDACTED]  
Aiken, SC [REDACTED]

Service Request: 1-405509837

Customer Relationship Manager: Hollie McIntyre

Dear [REDACTED]

Chevrolet is pleased to provide service coverage for the alternator on your 2006 Chevrolet Malibu, Vehicle Identification Number 1G1ZU53876F [REDACTED]. This service coverage will commence upon the expiration of the applicable New Vehicle Limited Warranty and will continue until February 24, 2012, or 75,000 miles, whichever occurs first. Chevrolet will make repairs to correct defects related to materials or workmanship occurring during the coverage period specified above. The following items are covered:

Alternator

Chevrolet will not be responsible for conditions arising from tampering, abuse, physical damage, or improper maintenance. This coverage is not transferable to any other vehicle or subsequent owner of your vehicle. Please keep this letter with your Malibu. Should your vehicle require repairs within the coverage period, present this letter to the Service Manager of an authorized Chevrolet Dealership.

If you have any future questions, please feel free to contact our Chevrolet Customer Assistance Center at 1-800-222-1020 Monday through Friday between 8:00 a.m. and 11:00 p.m., Eastern Time. Please refer to your service request number above and any of our Customer Relationship Managers will be happy to assist you.

Sincerely,

Chevrolet Division  
General Motors Corporation

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ATTENTION: DEALERSHIP SERVICE MANAGER  
Component Service Coverage

Submit the claim with all the appropriate authorization codes and H route it to your Area Service Manager. Be sure to retain a copy of this letter in the customer's file and return the original to the customer.



Privileged and Confidential Information

CASE ASSESSMENT BY: Rayma Knight

Siebel/CARS Request No: 1-405509837

Customer Name: [REDACTED]

Year of Vehicle: 2006 Make: Chevrolet

Model: Malibu

Current Mileage: 1400

Vehicle ID No.: 1G1ZU53876F1 [REDACTED]

In Service Date: 2/24/2006

Purchased: New

What is customer seeking: mediation/ arbitration

VEHICLE REPAIR HISTORY

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: No power steering

<u>Date:</u>	<u>Mileage:</u>	<u>Days Out:</u>	<u>Description of Repair:</u>
4/12/06	547	7	C/S: Vehicle has no power steering Cause: System over voltage acid in battery boiled out draw drained alternator DLR: Replaced battery and alternator

CUSTOMER'S PRIMARY SYMPTOM/CONCERN: Vehicle idles up to 1100 RPMs and will not idle down

<u>Date:</u>	<u>Mileage:</u>	<u>Days Out:</u>	<u>Description of Repair:</u>
4/12/06	547	*	C/S: Vehicle idles up to 1100 RPMs and will not idle down Cause: Module shorted DLR: Replaced blower module

OTHER SYMPTOM/CONCERN: Left turn signal

<u>Date:</u>	<u>Mileage:</u>	<u>Days Out:</u>	<u>Description of Repair:</u>
1/11/06	10	1	C/S: Left turn signal inop. Cause: Bulb blown traced wires to bottom of fuse box DLR: Found loose connection at terminal FS at connector C109 repaired terminal

Total Days Out of Service: 8 (excluding days for customer pay reasons such as; Maintenance and Collision Repairs)

VEHICLE MEETS PRESUMPTION LEMON LAW?

YES: ☐

NO: ☒

What is customer eligible for (based upon the BBB Program Eligibility Guidelines and the States lemon law requirements for meeting presumption)?

Repairs per the terms of the manufacturer's new vehicle warranty

Team Manager Approval:

Date:



Privileged and Confidential Information

**AVM and/or DEALER RECOMMENDATION(s):**

DLR: only seen vehicle total of 2 times for any complaints. In this vehicle, it has electric steering and high voltage to alternator boiled the acid out of the battery and all the voltage was absent from power steering and everything. Vehicle has been repaired.

**CRM RECOMMENDATION & RATIONALE (EXPLAIN):**

Only one time seen for the concern and vehicle is repaired at this time.

Doesn't meet presumption.

There is no defect.

Ineligible

Offer component letter on alternator for customer satisfaction and to settle this claim.

Decision reached by CRM: Arbitrate case: ☐ Settle case: X☐

Team Manager Approval:

Date:





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GENERAL MOTORS BUSINESS RESOURCE CENTER

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**VIA FAX ONLY**

June 7, 2006

Mr. Mike Ready  
Henna Chevrolet-Oldsmobile-Cadillac, Llc  
3625 Richland Ave W  
Aiken, SC 29801-6313  
FAX: 803-641-4557

Re:

SR# 1-405509837  
2006 Chevrolet Malibu  
VIN # 1G1ZU53876F

Dear Mr. Ready:

This is a letter of notification regarding a Better Business Bureau case CHV0651213 involving the above referenced customer.

In order to perform a case assessment, please provide me with copies of all dealer sales and service documents regarding this vehicle. The specific documents needed are:

- All sales, purchase and finance agreements, including a conversion invoice (if applicable)
- The incentives acknowledgement form
- The Actual Cash Value statement of any trade
- All service and body shop repair orders including all internal, customer pay, and warranty repair orders. (Please include front and backs of the shop copies).

Please fax them to the number found below. If there are any fax difficulties or the documents exceed 50 pages, please contact me as soon as possible.

Your cooperation is greatly appreciated. If you have any questions, feel free to contact me directly at the number below.

Sincerely,

Rayma Knight  
BRC Customer Relationship Manager  
Ph# 866-790-5700, prompt 9, prompt 5, extension 20003  
FAX# 866-589-3991



**Overallowance/Incentives/Negative Equity Form (non-Florida)****Customer:** [REDACTED]**Request #:** 1-405509837**BBB#:** CHV0651213

This form may be used to identify possible overallowance or negative equity and to determine any customer incentives which were paid, but may not be easily identifiable on a Bill of Sale.

You must determine the TRUE purchase price of a vehicle and identify any over allowance and/or incentives prior to arbitration or voluntary repurchase.

**\* PLEASE NOTE: IF BALANCE OWED / LOAN CLOSEOUT AMOUNT IS HIGHER THAN ACV, THIS IS CONSIDERED NEGATIVE EQUITY!**

Purchase Price (from dealer Bill of Sale before tax, tag, etc)	\$24,815.00
MSRP (from BARS Invoice) <i>Note: If GMS price, use in place of MSRP price</i>	\$25,955.00
Difference (If positive, look for Over Allowance) <b>If no Trade in, have Dealer explain why customer paid more than MSRP.</b>	\$1,144.00(-)

Trade Allowance (from dealer Bill of Sale)	\$2,500.00
Actual Cash Value Statement	\$1,500.00
Difference (if positive, this is the overallowance)	\$1,000.00

Payoff or Lien amount from Bill of Sale <i>(If dealer added negative equity into contract, do not subtract)</i>	\$0.00
Actual Cash Value Statement	\$-1,500.00
Difference (if positive, this is the negative equity )	\$-1,500.00

**If Over Allowance/Negative Equity and/or Incentives (not included in Purchase Price) are found, verify with Team Manager before submitting information to BBB**

Purchase Price (from dealer Bill of Sale before tax, tag, etc.)	\$24,815.00
Incentives not included in Purchase Price (from BARS) minus <i>(Do not include fuel fill credit or dealer incentives. GM Card Points must be included)</i>	\$-500.00



Overallowance and/or Negative Equity minus	<u>\$-1,000.00</u>
Actual price of Vehicle that should be presented to BBB for ATA	<u>\$23,315.00</u>