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

ODI RESUME

Investigation: EA 04-012
Prompted By: PE04-004
Date Opened: 04/30/2004
Principal Investigator: NATE SEYMOUR
Subject: HYDRAULIC PUMP SHAFT FAILURES

Manufacturer: GENERAL MOTORS CORP.
Products: 2000-2004 GM C/K/G 2500 & 3500 VEHICLES W/HYDRO-BOOST
Population: 1500000 (ESTIMATED)

Problem Description: THE HYDRAULIC PUMP SHAFT CAN FRACTURE RESULTING IN A COMPLETE LOSS OF POWER ASSIST TO THE BRAKING AND STEERING SYSTEMS.

FAILURE REPORT SUMMARY

	ODI	Manufacturer	Total
Complaints:	30	261	291
Crashes/Fires:	3	21	23
Injury Incidents:	1	2	3
# Injuries:	1	3	4
Fatality Incidents:	0	0	0
# Fatalities:	0	0	0
Other*:	0	20404	20404

*Description Of Other: GM WARRANTY CLAIMS

Action: AN ENGINEERING ANALYSIS HAS BEEN OPENED.

Engineer: *Nate Seymour* NS Date: *04/30/2004*
Div. Chief: *Richard Boyd* Date: *04/30/2004*
Office Dir.: *Kathleen C. DeMeter* Date: *04/30/2004*

Summary: WITH THIS UPGRADE, ODI IS LIMITING ITS INVESTIGATION TO VEHICLES EQUIPPED WITH A HYDRO-BOOST SYSTEM, WHICH PROVIDES POWER ASSIST TO THE BRAKING AND STEERING SYTEMS. VACCUUM BRAKE BOOSTER VEHICLES ARE EXCLUDED. ODI HAS EXPANDED THE SCOPE OF THE INVESTIGATION TO INCLUDE MODEL YEARS 2003 AND 2004, AS DURING THE PE, ODI LEARNED THAT THE HYDRO-BOOST PUMPS WERE MODIFIED IN FEBRAURY 2004. THIS IMPLIES THAT VEHICLES BUILT AFTER FEBRUARY 2004 MAY NOT EXPERIENCE THE PROBLEM. THEREFORE, SOME MY 2004 VEHICLES MAY BE SUBJECT TO FAILURES. ODI BELIEVES THAT VEHICLES BUILT PRIOR TO NOVEMBER 1999 WILL NOT EXPERIENCE THE PROBLEM.

ODI IS CONCERNED BECAUSE THIS IS A SUDDEN FAILURE THAT AFFECTS TWO CRITICAL SYSTEMS OF THE VEHICLE, BRAKES AND STEERING, AT THE SAME TIME. THE ABILITY OF THE OPERATOR TO HANDLE THE DUAL FAILURES IS A CONCERN. FURTHER, THESE VEHICLES TEND TO BE WORK VEHICLES, WITH SOME OVER 10,000 POUNDS GVWR AND MANY EQUIPPED TO PULL LARGE TRAILERS. DUAL FAILURES ON HEAVILY LOADED VEHICLES AND VEHICLES PULLING TRAILERS FURTHER INCREASES THE SAFETY RISK.

ODI PLANS TO CONDUCT TESTING TO QUANTIFY THE BRAKING AND STEERING PERFORMANCE DEGRADATION AND THE IMPACT ON SAFE VEHICLE CONTROL WHEN A HYDRO-BOOST PUMP FAILS.

Ind. faxed on 5/3/04

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

1-888-DASH-2-DOT

(1-888-327-4236)

INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 08-MAR-2004	Repository ☐
	Reference No. 10060670

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number	E-mail Address
Address			
City			

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
3GNGK26G1[redacted]	CHEVROLET	SUBURBAN	2001

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
18-OCT-03	JIM KEIL			No. Cylinders 8	Gas
Original Owner ☐	Dealer's City GRASS VALLEY	State CA	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	015100 STEERING:HYDRAULIC POWER ASSIST:PUMP Multiple Failures: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-MAR-2004	49000	5	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMA19ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

WHILE ATTEMPTING TO DEPART FROM PICKING UP OUT TRAVEL TRAILER, BOTH THE POWER STEERING AND BRAKES WENT OUT ON OUR 2500 4 WHEEL DRIVE SUBURBAN. THE ONLY THING THAT STOPPED THE SUBURBAN WAS THE TRAILER'S BRAKES. LUCKLY WE WERE STILL IN THE PARKING LOT AND THEREFORE GOING SLOW.
UPON EXAMINATION, I PULLED THE SURPINETINE BELT OFF AND THE POWER STEERING PULLY AND SHAFT CAME OFF.
FROM WHAT I UNDERSTAND THE STEERING AND THE BRAKES ARE CONNECTED. THIS CAN ALSO HAPPEN WHEN THE BRAKE BOOSTER GOES OUT.
THE GOOD THING IS THAT THIS NOT ONLY HAPPENED IN TOWN BUT NOT ON THE FREEWAY GOING DOWN A GRADE PULLING A 9,000 LBS TRAILER.
I HAVE REPLACED THE POWER STEERING PUMP AND AM IN THE PROCESS OF HAVING THE BRAKES BLEED AS THEY DON'T "FEEL" RIGHT.*AK

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 11-FEB-2004	Repository ☐
	Reference No. 10057046

OWNER INFORMATION (Type or Print)

Name [redacted] Email Address
Addr [redacted]
City [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GTGK29U2YE[redacted]	GMC	SIERRA	2000

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
		No: Cylinders 8	Gas

Original Owner	Dealer's City	State	Zip Code
☒			

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	015100 STEERING:HYDRAULIC POWER ASSIST:PUMP Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
08-FEB-2004		15	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

I WENT INTO A SLIDE ON ICE ,SPINNING 180 DEGREES, I CAME TO A STOP WITHOUT HITTING ANYTHING. AFTER I GOT CONTROL I HAD NO POWER STEERING OR BRAKES. I DROVE THE TRUCK
HOME AND INVESTIGATED THE PROBLEM WITH THE HELP OF FRIENDS AND A SPECIFIC REPAIR MANUAL. THE PROBLEM IS THE POWER STEERING SHAFT COMPLETELY SEVERED.*AK

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100146

Date Received	Repository ☐
02-FEB-2004	Reference No. 10056310

OWNER INFORMATION (Type or Print)

Name [redacted]
Addr [redacted]
City [redacted]

Daytime Telephone Number | E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCGK29UXYE[redacted]	CHEVROLET	SILVERADO	2000

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
28-DEC-99				No: Cylinders 8	Gas
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain 4 WHEEL DRIVE	033000 SERVICE BRAKES, HYDRAULIC:POWER ASSIST Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
31-JAN-2004	30000	15

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMA1SABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

THIS OCCURRED ON SATURDAY, 1/31/04. VEHICLE MAKE: 2500 CHEVROLET SILVERADO, 3/4 TON, 6' BED, 6L ENGINE DESCRIPTION: I HAD TO MAKE A TIGHT RIGHT HAND TURN FROM A GAS STATION ONTO THE MAIN ROAD IN SYRACUSE, NEW YORK AS OPPOSING TRAFFIC WAS COMING AT ME. AFTER I COMPLETED THE TURN AND STARTED TO HEAD SOUTH ON THE MAIN FOUR LANE ROAD I IMMEDIATELY FOUND OUT THAT THE POWER STEERING WAS QUITE ROUGH. QUITE ROUGH WAS NOT THE WORD FOR IT AS THERE WAS NO POWER STEERING! ABOUT A BLOCK FROM THAT POINT I HAD TO BRAKE AND FOUND OUT THAT THERE WERE NO POWER ASSISTED BRAKES ON THE VEHICLE. NO IDIOT LIGHTS CAME ON AT ALL AND THIS PRESENTED QUITE A SERIOUS PROBLEM ESPECIALLY WITH THE SNOW PLOW ATTACHED. BOTH THE FLUID IN THE MASTER BRAKE AND POWER STEERING CYLINDERS WERE RIGHT UP TO NORMAL LEVELS AND THE SERPENTINE BELT WAS RELATIVELY NEW AND INTACT! TRUST ME THAT I AM NOT HAPPY ABOUT THIS AT ALL FROM A VEHICLE THAT HAS ONLY 30,000 MILES ON IT AND HAS BEEN PLAGUED WITH VARIOUS MAJOR PROBLEMS THROUGHOUT ITS SOMEWHAT YOUTHFUL HISTORY INCLUDING TWO (2) FULL BRAKE JOBS TO DATE. I'M JUST THANKFUL THAT NO ONE WAS HURT INCLUDING MYSELF. I WANT THIS LETTER TO BE RELAYED TO THE CHEVROLET ZONE MANAGER AND I WOULD LIKE THEIR INPUT ON THE ISSUES THAT HAVE BEEN PRESENTED. AS A CONSUMER THERE IS NO WAY THAT BOTH THE POWER STEERING AND BRAKES SHOULD HAVE GONE AT THE SAME TIME, PLUS, THE FACT THAT THERE WERE NO INDICATIONS OF A MAJOR PR

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 24-MAR-2004	Repository ☐
	Reference No. 10063757

OWNER INFORMATION (Type or Print)

Name [redacted]
Addr
City

Daytime Telephone Number	E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCGK29U9YE[redacted]	CHEVROLET	SILVERADO	2000

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
29-DEC-03	BLESKIN MOTOR CO	No: Cylinders 8	Gas

Original Owner	Dealer's City	State	Zip Code
☐	GREAT FALLS	MT	59405

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	015000 STEERING:HYDRAULIC POWER ASSIST SYSTEM Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
23-MAR-2004	31800	0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMA9ABC096)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

I WAS BACKING OUT OF MY GARAGE AND MY 2000 SILVERADO 2500HD DIDN'T STEER AND I COULDN'T STEER IT . THERE WAS POWER STEERING OIL ON MY GARAGE FLOOR I HAVE 31800 MILES ON THE 6 LITER ENGINE. *NM

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 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 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.

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 14-JAN-2004	Repository ☐
	Reference No. 10053178

OWNER INFORMATION (Type or Print)

Name [redacted]
Addr
City

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCHC291X1F[redacted]	CHEVROLET	2500 HD	2001

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
28-NOV-00		No: Cylinders 8	Diesel

Original Owner	Dealer's City	State	Zip Code
☒			

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	033200 SERVICE BRAKES, HYDRAULIC:POWER ASSIST:HYDRAULIC Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
30-DEC-2003	54613	10

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTHALBABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

2001 CHEVROLET 2500HD PICKUP HAD A COMPLETE POWER BRAKE AND POWER STEERING FAILURE ALMOST RESULTING IN A CRASH AS I WAS ALMOST NOT ABLE TO BRING THE VEHICLE TO A STOP. LUCKILY NO ONE WAS IN FRONT OF ME. MECHANIC STATES THAT PUMP SHAFT HAD A BREAK IN IT. I'VE STILL GOT THE PART IF THAT WOULD HELP WITH YOUR INVESTIGATION. LUCKILY I WAS NOT TOWING MY 10,000 POUND RV TRAILER AT THE TIME OF THE FAILURE OR I MAY NOT HAVE BEEN ABLE TO CONTROL THE VEHICLE. *AK

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 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 whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with a administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148	
Date Received 22-FEB-2004	Repository ☐
	Reference No. 10058691

OWNER INFORMATION (Type or Print)

Name [redacted]
Addr
City

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCGK29U5Y[redacted]	CHEVROLET	SILVERADO	2000

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
17-APR-00	CHASE CHEVROLET 209-475-6630	No: Cylinders 8	Gas

Original Owner	Dealer's City	State	Zip Code
☐	STOCKTON	CA	95212

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	015100 STEERING:HYDRAULIC POWER ASSIST:PUMP Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
19-FEB-2004	66002	40

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example: P215/65R15)
DOT No. (Example: DOTMAL9ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

THE POWER STEERING PUMP FAILED WHICH MADE THE STEERING AND THE BRAKES EXTREMELY DIFFICULT TO OPERATE. *JB

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 335

Date Received	Repository ☐
09-FEB-2004	Reference No. 10057757

OWNER INFORMATION (Type or Print)

Name [redacted]
Addre[redacted]
City [redacted]

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ *YES* ☒ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GBHG31R91[redacted]	CHEVROLET	EXPRESS	2001

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
12-MAY-03					
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code: 015100 STEERING:HYDRAULIC POWER ASSIST:PUMP
			Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMA19ABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

WHILE DRIVING ON THE HIGHWAY ENGINE AND BRAKES FAILED AT THE SAME TIME. VEHICLE WAS TOWED TO THE DEALER, WHO DETERMINED THAT POWER STEERING SHAFT SEPARATED, AND DEALER REPLACED THE POWER STEERING PUMP. *AK

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252	
Date Received 26-FEB-2004	Repository ☐
	Reference No. 10055619

OWNER INFORMATION (Type or Print)

Name [redacted] E-mail Address
Address
City

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ *YES* ☒ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1GCHK29U61[redacted]	CHEVROLET	SILVERADO	2001

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
	ANDERSON CHEVROLET			No: Cylinders 8	Gas
Original Owner ☒	Dealer's City	State	Zip Code		
	REDWOOD CITY	CA	94030		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	093000 SERVICE BRAKES, HYDRAULIC:POWER ASSIST Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-JAN-2004	35000	10	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMA1SABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).

WHILE COMING TO A STOP ON A HILL THE CONSUMER APPLIED THE BRAKES HOWEVER THEY DID NOT OPERATE PROPERLY. WHEN BACKING OUT STEERING WHEEL DID NOT MOVE. THE CONSUMER HAD THE VEHICLE TOWED TO THE DEALER FOR ANALYSIS. THE DEALER DETERMINED THAT THE SHAFT IN THE POWER STEERING PUMP SNAPPED AND CAUSED THE BRAKES AND STEERING TO FAIL. THE DEALER REPLACED THE POWER BOOSTER, POWER STEERING PUMP AND SERPENTINE BELT. *AK *NM

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100184	
Date Received 20-JAN-2004	Repository ☐
	Reference No. 10055433

OWNER INFORMATION (Type or Print)

Name	[redacted]	E-mail Address
Address		
City		

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date ___/___/___

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
	CHEVROLET	SUBURBAN	2000

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code 015100 STEERING:HYDRAULIC POWER ASSIST:PUMP
			Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
04-NOV-2003	500		

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMALSABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	N

Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

WHILE DRIVING AT ANY SPEED STEERING WHEEL STUCK. WHEN THIS OCCURRED IT FELT LIKE DRIVING WITHOUT POWER STEERING ASSIST. VEHICLE WAS TAKEN TO THE DEALER, WHO REPLACED THE POWER STEERING PUMP. ALSO WATER AND FUEL PUMPS WERE REPLACED. *AK

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 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 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.

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 120

Date Received: 20-JAN-2004 | Repository ☐ | Reference No. 10056427

2004 FEB 26 AM 9:36

OWNER INFORMATION (Type or Print)

Name [redacted]
Address
City
Telephone Number | E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☒ NO
In the absence of a [illegible]
Signature of Owner [redacted]

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side)	Make	Model	Model Year
1GTGK29U7Y[redacted]	GMC	SILVERADO	2000

Date Purchased	Dealer's Name and Telephone Number	Engine: No. Cylinders	Fuel Type:
12/31/99	Don Holzer, Inc 715-682-8141	8	

Original Owner	Dealer's City	State	Zip Code
☐	Ashland	WI	

Transmission Type		Powertrain	Vehicle Component Code
Auto	☒ Antilock Brakes ☒ Cruise Control		033000 SERVICE BRAKES, HYDRAULIC:POWER ASSIST
			Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
20-JAN-2004	62,000	10 mph

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMALSABC0336)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Fatalities, Crashes, and Injuries.)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	None		N

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

CONSUMER STATED THAT ABOUT 2 WEEKS AGO WHILE BACKING OUT OF GARAGE POWER BRAKES AND POWER STEERING FAILED. CONSUMER SHUT OFF THE VEHICLE OFF AND THEN RESTARTED IT. VEHICLE WORKED PROPERLY AFTERWARDS. ALSO, CONSUMER STATED THAT HE THAT THERE WAS OF A RECALL ON THIS VEHICLE. *AK

Contacted GMC + reported the above. They gave me this number 1-178444725 As a reporting number. Vehicle has not failed again. Also contacted dealer service + explained problem.

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 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 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.

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
12-JAN-2004	Reference No. 10053002

OWNER INFORMATION (Type or Print)

Name [redacted]
Address
City

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
	CHEVROLET	C/K 3500	2001

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders 8	Fuel Type: Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	015100 STEERING:HYDRAULIC POWER ASSIST:PUMP Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
09-JAN-2004	127000	45

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTMALSABC036)	☐ Original Equipment ☐ Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION
(Please describe in detail the incident(s), Failure(s), Crash(es) and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☒ Yes ☐ No	☐ Yes ☒ No	0	0	Y

Narrative Description of Incident(S), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

I HAVE A 2001 CHEVROLET C3500 PICKUP, I AM A TRAILER PULLER FOR FEMA WHILE WORKING IN CA, AND DRIVING DOWN A STEEP MOUNTAIN SIDE WHEN I APPLIED MY BRAKES, MY POWER STEERING WENT OUT ALSO MY POWER BRAKES BECAME REAL HARD . LATER I CALLED MY DEALERSHIP TALKED WITH A TECHNICIAN, I WAS INFORMED THAT THEY WERE HAVING PROBLEMS WITH POWER STEERING PUMPS, I REMOVED MINE, FOUND HALF BROKEN, AFTER REPLACING POWER STEERING PUMP, STEERING AND BRAKES RETURNED TO NORMAL.
*LA

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 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 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.