

U.S. Department
of TransportationNational 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

Date Received

11/29/01

OFFICE OF VEHICLE SAFETY DEFECTS INVESTIGATION

 Od_or _____
 rt_dt _____
 od_rn _____
 up_ltr _____

Reference No.

OWNER INFORMATION (Type or Print)

Name

Street No.

City Sarasota

State Florida

Daytime Telephone Number

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 forward your name or address to the vehicle manufacturer.

Signature of Owner

Date 11/26/02

VEHICLE INFORMATION

Vehicle Identification No. (VIN) (Located at bottom of windshield on driver's side)

1 0 4 H R 5 4 K O 2 U 1 7 4 4 4 8 BUICK

Make

Model

LESABRE LTD

Year

2002

Purchased Date

11/29/01

Dealer's Name

DARBY BUICK

Engine Size (CID/GAL)

☐ Turbo
☐ Diesel

☒ Gas

☐ Fuel Injection

☐ New ☐ Used

Dealer's City

Sarasota

State

FL

Zip Code

342

No. Cylinders

6

Manufacture Date (on driver's door or pillar)

10-01

Transmission Type

☐ Manual

☒ Automatic

Restraint System

☒ Driverside Air Bag

☐ Motorball

☒ Passengerside Air Bag

☐ 2-Point Belt

☐ 3-Point Belt

Cruise Control

☒ Yes

☐ No

Drivetrain

☒ Front

☐ Rear

☐ 4-Wheel

Vehicle Type

☒ Car

☐ Sport Utility

☐ Van

☐ Truck

☐ Minivan

☐ Motorcycle

☐ Other

Body Style

☐ 2-Door

☒ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)

FUEL PUMP

Location

☐ Left

☐ Right

☐ Front

☐ Rear

Failed Part(s)

☒ Original

☐ Replacement

Handicap Adaptive Equip

☐ Yes

☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand

Tire Name

Complete Tire Size

DOT No.

No. of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s) Available?

☐ Yes ☐ No

NHTSA Previously Contacted?

☐ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Fatalities

0

Reported to Manufacturer

☒ Yes ☐ No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). On 10/24/02 we drove to Greensboro, NC from

Ohio travelling through the mountains of Virginia and West Virginia. We

stayed in Greensboro until the morning of 10/27/02 when left at 6:00 AM.

We drove about 3 blocks from our son's home and as we turned a corner the

engine stalled and would not restart. The problem was diagnosed as a

defective fuel pump. My concern is that there was no warning or indication

the component would cease to function on an auto eleven months old and with

only 11 thousand plus miles on it. This failure could have occurred as we

travelled thru the mountains, or while driving on I 95 enroute to Florida, while

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

being indicated by a sign, which is usually the problem on that Interstate.
For these reason I believe the fuel pump failure is a Safety Hazard.

A copy of the repair invoice is enclosed as information.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

**VEHICLE
OWNER'S
QUESTIONNAIRE**

(V00)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS

COMPLETE THIS FORM

OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

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(DASH) 2 DOT



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**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**