



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 100147

Date Received

2003 MAR 17
06-FEB-2003

Repository

Reference No. 1
10006654

OWNER INFORMATION (Type or Print)

Name

Address

City

BILLINGS

State

MT

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

SAME

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: 2/2/03

VEHICLE INFORMATION

17 Digit Vehicle Identification Number Located at Bottom of Instrument Cluster Driver's Side

FULL VIN: 1G2NE52E5XM708765

Make

PONTIAC

Model

GRAND AM

Model year

1999

Date Purchased

Dealer's Name and Telephone Number

Riviera Group 406 (405)-5000

Engine:

No. Cylinders

6

Fuel Type:

GAS

Original Owner

Dealer's City

BILLINGS

State

MT

Zip Code

59102

Transmission Type

Auto

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

01000 STEERING

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
15-DEC-2002

Failure Mileage
32,700

Failure Speed
10 mph

POWER STEERING HOSES - FLUID LEAKAGE

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

Yes No

Fire

Yes No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

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 STEERING WHEEL WOULD BE VERY HARD TO TURN. PH

POWER STEERING HOSES (High Pressure & Return) Rub together above engine cradle. Rubber Return Hose came loose from fitting causing power steering fluid leak (significant) caused power steering response & also sprayed fluid at engine & exhaust (could have caused fire)

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

ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974 (Public Law 93-502) 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 to 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.