



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 1375

Date Received

Repository ☐

2003 MAR 17 2:18 PM '03

Reference No.
10006743

OWNER INFORMATION (Type or Print)

Name

Address

City BABYLON

State NY

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 authorized signature, please print your name and address in the vehicle manufacturer.

Signature of Owner

Date 2/28/03

VEHICLE IDENTIFICATION

13-digit vehicle identification number located at bottom of windshield on driver's side

162NE14N6UC

Make
PONTIAC

Model
GRAND AM

Model Year
1992

Date Purchased

USED

Dealer's Name and Telephone Number

Engine:
No. Cylinders

6

Fuel Type:

GAS

Original Owner

Dealer's City

State

Zip Code

Transmission Type

Automatic

☒ Antilock Brakes

☒ Cruise Control

Powertrain

FRONT wheel
DRIVE

Vehicle Component Code

061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

21-FEB-2003

Failure Mileage

88,100

Failure Speed

30 MPH
+ 50 MPH

Computer / Cruise Control
Accelerator, Brake

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: DOTM4SABC036)

☐ 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

1

Number of Deaths

0

Reported to Police

* YES

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).

VEHICLE SUDDENLY ACCELERATED AND CRASHED INTO A POLE. PH after stopping for traffic light, began to accelerate, acceleration continued to increase, could not pull pedal up or slow car down, after detouring to road w/o people or vehicles, car accelerated to about 50mph, lost control of vehicle on sand patched road after sharp right turn. Constant exhaustive efforts to brake including emergency brake were unsuccessful in stopping vehicle. Impact occurred at rock wall + pole on left front side of car. Car was totaled driver crawled out of window. Vehicle remained running with motor racing ->

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 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.

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

Driver suffered injury to knees, chest, back & head - no cuts
The collision occurred 5 to 10 minutes after leaving parking
lot where car had been all day & into evening, at temperatures
below 10°. Collision occurred at approximately 9:45 PM in
Harrison, N.Y.

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

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73175 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, NVS-216
400 7th Street, SW
Washington, DC 20590



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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http://www.safercar.gov/defects