



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 1374

Date Received

Repository ☐

Reference No.
10006903

OWNER INFORMATION (Type or Print)

Name

Address

City NEWFIELD

State NJ

Zip Code

Daytime Telephone Number

E-mail Address

Evening 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 send this report to the vehicle manufacturer.
Signature of Owner Date 2/29/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

Make

OLDSMOBILE

Model

BRAVADA

Model Year

1996

Date Purchased

10/30/99

Dealer's Name and Telephone Number

Saturn of English Creek

Engine:

No: Cylinders

Fuel Type:

Gas

Original Owner

☐

Dealer's City

Egg Harbor Twp

State

NJ

Zip Code

08234

Transmission Type

Automatic

☒ Antilock Brakes

☒ Cruise Control

Powertrain

4 wheel drive

Vehicle Component Code

030000 SERVICE BRAKES, HYDRAULIC

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Continuous

Failure Mileage

57,941

Failure Speed

any speed

If you hit a pothole or any bump at the time you apply brakes, they go to floor. You have to let go of the brakes and apply them again in order to stop.

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: DOTM19ARC036)

☐ 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

Number of Deaths

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 VEHICLE EXPERIENCED EXTENDED STOPPING DISTANCE. *JB

* Also, hazard switch on steering column shorts out brake lights. Have to push switch to left for brake lights to work.

* Windshield wiper occasionally worked, had to have wires soldered together to fix. Was told this vehicle was not one that was recalled for this.

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.