



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 MAY 27 AM 10:44
24-APR-2003

Repository
Reference No.
10017534

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City SAINT PETERS State MO Zip Code [Redacted]

Daytime Telephone Number [Redacted] E-mail Address [Redacted]
Evening Telephone Number [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 [Redacted] your name or address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 5/19/03

VEHICLE INFORMATION

Make PONTIAC Model TRANSPORT Model Year 1997
Date Purchased [Redacted] Dealer's Name and Telephone Number [Redacted] Engine: No: Cylinders [Redacted] Fuel Type: [Redacted]
Original Owner Dealer's City [Redacted] State [Redacted] Zip Code [Redacted]
Transmission Type Antilock Brakes Cruise Control Powertrain [Redacted] Vehicle Component Code 121100 EXTERIOR LIGHTING:HEADLIGHTS:CONCEALMENT DEVICES
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 15-MAR-2003 Failure Mileage [Redacted] Failure Speed 55

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]
DOT No. (Example: DOTM19A1BC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

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 [Redacted] Number of Deaths [Redacted] 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(s), parts repaired or replaced (and if old part is available).

WHILE DRIVING, THE RIGHT HEADLIGHT LENS BLEW OFF THE VEHICLE. *JB
CAUGHT

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)

This created a dangerous situation, as the bulb eventually burned out, w/ the rain hitting it. The Auto Manufacturer sent me to a retail manufacturer who informed me this is a really big problem & there is a recall sheet on it. I called the dealer & he said w/ out of ordering the entire head light assembly & installing it. If I didn't know better, it'd look planned, as the assembly was manufactured for a quick disconnect??

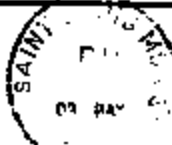
ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

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

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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, NVS-216
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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(DASH) & DOT



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