



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 1368

Date Received

2003 AUG -9 AM 12
14 JUL 2003

Repository ☐

Reference No.
10027176

OWNER INFORMATION (Type or Print)

Name

Address

City

KATY

State TX

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

In the absence of an ☐ T provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 7/28/03

VEHICLE INFORMATION

Make

BUICK

Model

LESABRE

Model Year

2002

Date Purchased

10/15/02

Dealer's Name and Telephone Number

DEMONTROUD

281-872-7200

Engine:

No. Cylinders

6

Fuel Type:

Original Owner

100

Dealer's City

State

Zip Code

Transmission Type

☒ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

136300 VISIBILITY: WINDSHIELD WIPER/WASHER: LINKAGES

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

09-JUL-2003

Failure Mileage

10,639

Failure Speed

50

WINDSHIELD WIPER

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: DOTM18ABC036)

☐ 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), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

ZERO

Number of Deaths

ZERO

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).

CONSUMER STATES THAT WHILE DRIVING AND WITH NO WARNING THE WINDSHIELD WIPER WILL WORK INTERMITTENTLY AND IT WILL BE HARD FOR THE CONSUMER TO SEE DURING RAINY WEATHER. DEALER NOTIFIED. *AK

IT WAS RAINING FAIRLY HARD. WINDSHIELD WIPERS COLLIDED. LEFT WIPER QUIT. RIGHT WIPER CONTINUED TO WORK, LEFT WIPER ARM NOT HAD COME OFF. DEALER REPLACED NOT WITH ONE HAVING NYLON INSERT SO IT WOULD NOT COME OFF. WHEN WIPER WAS INOPERATIVE

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

This Privacy Act of 2004-Public Law 107-359 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.

OVER

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

I COULD NOT SEE THE ROAD. I WAS ON
INTERSTATE HIGHWAY.

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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



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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QUESTIONNAIRE**

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TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
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and dial toll free at

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(DASH) & DOT



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