



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 SEP 12 PM 4:27
18-AUG-2003

Repository ☐
Reference No.
10034068

OWNER INFORMATION (Type or Print)

Name **[REDACTED]**
Address **[REDACTED]**
City **GROTON** State **NY** 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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner **[REDACTED]** Date **1/1**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield and driver's side: **1GHDX03E4XD151103**
Make **OLDSMOBILE** Model **SILHOUETTE** Model Year **1999**
Date Purchased **[REDACTED]** Dealer's Name and Telephone Number **Walter** Engine: No. Cylinders **6** Fuel Type: **[REDACTED]**
Original Owner ☐ Dealer's City **Groton** State **NY** Zip Code **13093**
Transmission Type ☒ Antilock Brakes ☒ Cruise Control Powertrain **[REDACTED]** Vehicle Component Code **160000 STRUCTURE**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **14-JUL-2003** Failure Mileage **51000** Failure Speed **[REDACTED]**
Aug

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: DOTM19ABC035) ☐ Original Equipment Prior Repair **[REDACTED]** 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;
i.e., parts repaired or replaced (and if old part is available).

WHILE GETTING INTO THE VEHICLE CONSUMER GRABBED THE GRAB BAR AND WITHOUT WARNING GRAB BAR SNAPPED, CAUSING THE CONSUMER TO FALL OUT OF THE VEHICLE. DEALER HAS BEEN NOTIFIED. *AK

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)

A paralyzed adult person using just bar
to get into car. That bar broke with just
partial weight on it. Luckily he only fell a
short distance so was not injured.

That bar is not safe and should not be
there or have a weight coming on it!!

ATTACH ADDITIONAL SHEETS IF NECESSARY

Reported to General Motors Case# 1-130-185-394

U.S. 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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THE FORM
ON

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.nhtsa.gov>