



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  
(1-888-327-4286)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100079

Date Received

2003 OCT -1  
28-AUG-2003

Repository

PH 2-27  
Reference No.  
10037894

OWNER INFORMATION (Type or Print)

Name

Address

City ADDISON

State IL

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 your name or address to the vehicle manufacturer.  
Signature of O: Date 8/18/03

VEHICLE INFORMATION

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

1G4HR53L1PH537933

Make  
BUICK

Model  
LESABRE

Model Year  
1993

Date Purchased  
June '93

Dealer's Name and Telephone Number  
Thomas Buck (Ph: Not Available)

Engine:  
No. Cylinders  
6

Fuel Type:  
Gasoline

Original Owner

Dealer's City  
Bensenville, IL

State  
IL

Zip Code  
60106

Transmission Type  
Automatic

Antilock Brakes  
 Cruise Control

Powertrain  
Front Drive

Vehicle Component Code  
19000 TIRES

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)  
28-AUG-2003

Failure Mileage  
55,805

Failure Speed  
70/60

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make  
GENERAL

Tire Model (Name or Number)  
GENERAL

Tire Size (Example P215/65R15)  
P205/20R15

DOT No. (Example: DOT149ABC036)  
A3MO FFA223

Original Equipment  
 Prior Repair

Failure Location:  
Left Rear Tire

Tire Component Code  
191000 TIRES TREAD/BELT

Tire Failure Type  
Belt Separation

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  
0

Number of Deaths  
0

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 DRIVING AT 70 MPH LEFT REAR TIRE TREAD SEPARATED. CONSUMER HAD TO PULL OVER. GENERAL TIRE: SIZE#, DOT# AND MODEL UNKNOWN. \*AK 60

Got on interstate 290 just 3 to 4 miles before. Then felt some vibration in steering wheel. Reduced speed, then noise (severe) from rear of car, then pulled onto shoulder of road, then replaced tire with spare, then had both rear tires replaced at Acorn Tire. \$2265.36 damage to the cars body ground rear left quarter.

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.

(over)

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

Damaged Tire slipped To (Contractor) (General) Tire for  
claim # 3241001 - Slipped To Charlotte, NC 9/5/03. See  
documents on enclosed CD ROM. See also pictures  
on enclosed CD ROM.  
(Tread separated but Tire held air pressure)

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



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



**VEHICLE  
OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH2DOT**

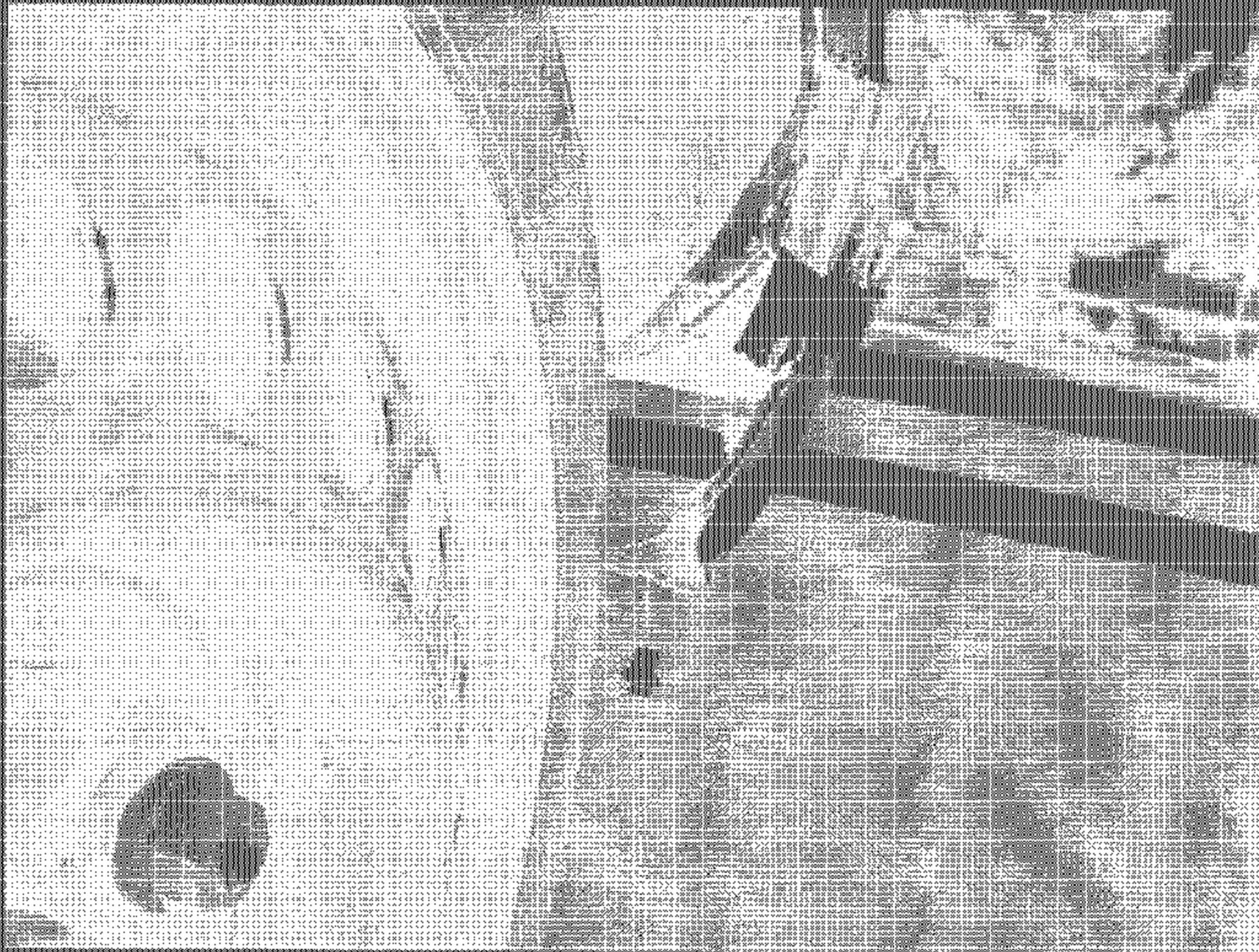
and dial toll free at

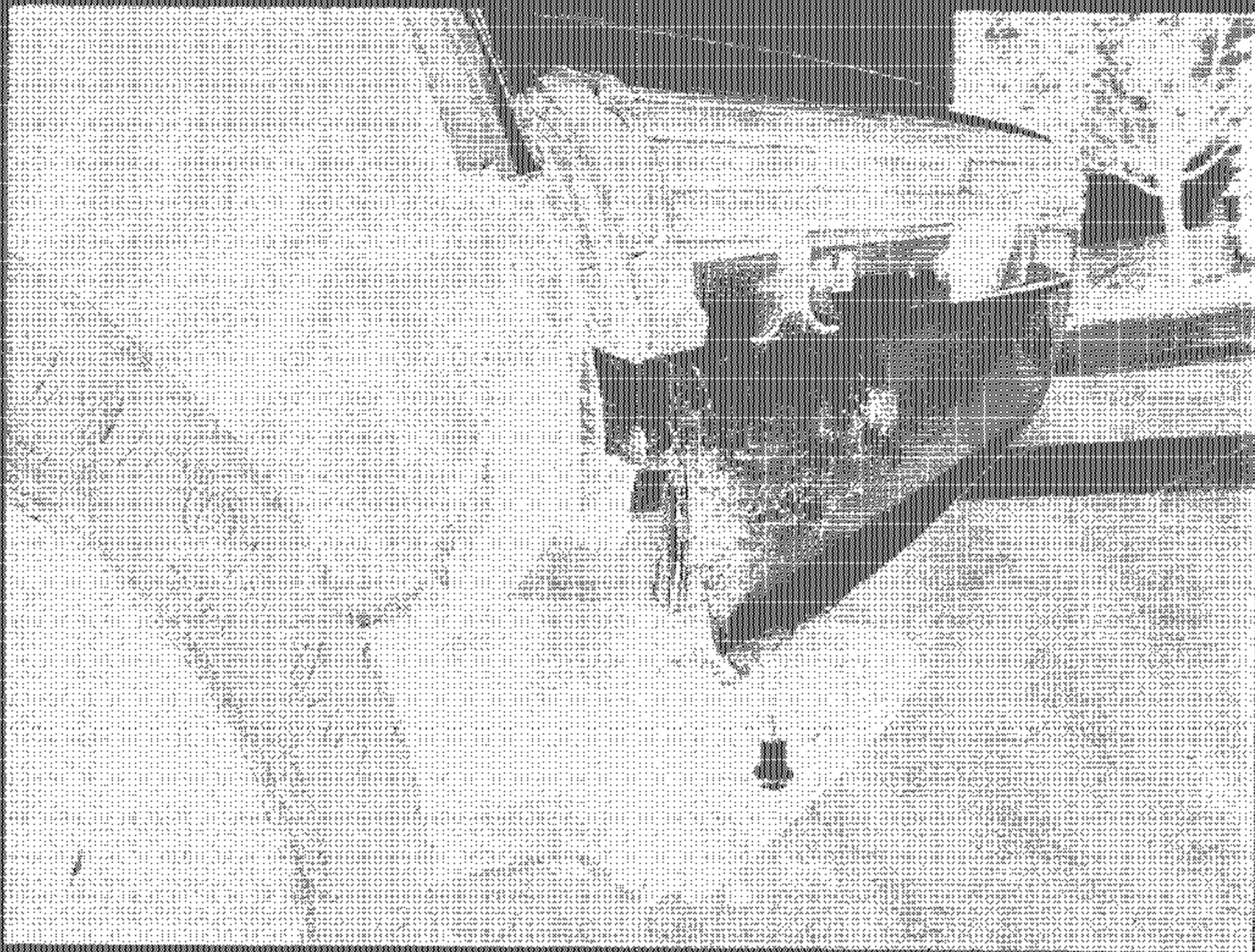
**1-888-DASH-2-DOT**  
**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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http://www.nhtsa.dot.gov/odiv/20





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