



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 100184

Date Received
2003 NOV -4 PM
02-SEP-2003

Repository
Reference No.
10038047

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: HUNTSVILLE State: TX Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]
Evening Telephone Number: SAME

E-mail Address: [Redacted]

Do you authorize the manufacturer of your vehicle? YES NO
In the absence of your name or address to the vehicle manufacturer.
Signature of [Redacted] Date: 11/2/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
PLEASE PROVIDE: [Redacted]

Make: CADILLAC Model: SEVILLE Model Year: 2001

Date Purchased: 8/1 Dealer's Name and Telephone Number: [Redacted]
Engine: No. Cylinders: [Redacted] Fuel Type: gas

Original Owner: Dealer's City: Huntsville State: TX Zip Code: 77330

Transmission Type: Auto Antilock Brakes Cruise Control Powertrain: [Redacted]
Vehicle Component Code: 103300 POWER TRAIN: AUTOMATIC TRANSMISSION: GEAR POSITION
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 15-AUG-2003 Failure Mileage: 23700 Failure Speed: 0-100 mph. don't know

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: DOTM15ABC036): [Redacted] 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: 1 Number of Deaths: 0 Reported to Police: Y

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 VEHICLE WAS IN PARK ON AN INCLINE IN CONSUMER'S DRIVEWAY, AND CONSUMER ATTEMPTED TO EXIT THE VEHICLE, VEHICLE POPPED OUT OF PARK, KNOCKING THE CONSUMER DOWN AND ROLLING OVER THE CONSUMER'S ANKLES. CONSUMER WAS NOT HOSPITALIZED, BUT DID SUFFER BRUISING AND SWELLING OF HIS ANKLES. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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 be apprised of its actions 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)

Ample injured -

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



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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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
1-888-927-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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