



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

Repository ☐

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24-SEP-2003

Reference No.
10040543

OWNER INFORMATION (Type or Print)

Name

Address

City

BOCA RATON

State

FL

Zip Code

Daytime Telephone Number

E-mail Address

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 _____ Date 11/23/03

VEHICLE INFORMATION

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

1G6VS3598PUE153

Make

CADILLAC

Model

ALLANTE

Model Year

1993

Date Purchased

0

Dealer's Name and Telephone Number

EUROPEAN AUTO SPECIALTY

Engine:

No. Cylinders

8

Fuel Type:

GAS

Original Owner

☐

Dealer's City

HOUSTON, TX

State

TX

Zip Code

77060

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

FROM WHEEL DRIVE

Vehicle Component Code

126000 EXTERIOR LIGHTING/TURN SIGNAL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

25-SEP-2002

Failure Mileage

44000

Failure Speed

—

CONSTANTLY CAN'T SEE SIGNAL + LIGHT
ON RAMP DAYLIGHT, CAN'T HEAR SIGNAL

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15) CLICK

DOT No. (Example: DOTM19ABC036)

☐ 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), 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).

WHEN THE SIGNAL LIGHTS ARE TURNED ON THEY CAN BE SEEN EXTERNALLY; BUT, CANNOT BE DETECTED ON THE INSIDE OF VEHICLE. DASH INDICATOR LIGHTS IS TOO FAINT TO BE SEEN BY THE CONSUMER NOR CAN THE TELL-TELL CLICKING INDICATOR BE HEARD. AT NIGHT DASH INDICATOR IS VISIBLE. THE CONSUMER OWNS TWO VEHICLES THAT ARE IDENTICAL IN MAKE/MODEL AND YEAR, AND BOTH ARE EXPERIENCING THE SAME PROBLEM. *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.