



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 335

Date Received

Repository ☐

2003 NOV 19 PM 11:23
28 SEP 2003

Reference No.
10040737

OWNER INFORMATION (Type or Print)

Name

Address

City

WEST POINT ISLAND

State ME

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 an authorization, NHTSA will not address the vehicle manufacturer.
Signature of Owner _____ Date 11/19/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at front of windshield on driver's side

1G2NF52TX4C531388

Make

PONTIAC

Model

GRAND AM

Model Year

2000

Date Purchased

4/4/01

Dealer's Name and Telephone Number

Wiscasset Ford

Engine

No. Cylinders

4

Fuel Type:

gas

Original Owner

Dealer's City

Wiscasset

State

ME

Zip Code

04578

Transmission Type

automatic

☒ Antilock Brakes

☒ Cruise Control

Powertrain

F.W.D.

Vehicle Component Code

010000 STEERING

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

1/5/02

Failure Mileage

37000

Failure Speed

All speeds

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: D0THAL9ABC036)

☐ 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, failure(s), condition(s) and (if any) recall.)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

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).

STEERING WHEEL GETS VERY STIFF WHEN MAKING LEFT TURNS. *AK

I started noticing the steering stiffening on left turns in January of 2002. It only had 37,000 miles on it and it was only 2 years old. It's very difficult to make left hand turns into parking lots, roads, driveways and even around corners at a higher rate of speed.

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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.