



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 100181

Date Received: 2003 NOV 12
14-OCT-2003

Repository

Reference No.
10042837

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: PROSPECT State: KY Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]

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 provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 10/27/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GHDX03E11D271288
Make: OLDSMOBILE Model: SILHOUETTE Model Year: 2001
Date Purchased: Dealer's Name and Telephone Number: Engine: No. Cylinders: Fuel Type:
Original Owner: Dealer's City: State: Zip Code:
Transmission Type: Antilock Brakes Cruise Control Powertrain: Vehicle Component Code: 191000 TIRES:TREAD/BELT
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 03-OCT-2003 Failure Mileage: 46700 Failure Speed:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: GOODYEAR Tire Model (Name or Number): EAGLE LS Tire Size (Example P215/65R16): P225/60R16
DOT No. (Example: DOTM1A9ABC036): 67N27MS Original Equipment Prior Repair Failure Location:
Tire Component Code: 191000 TIRES:TREAD/BELT Tire Failure Type: TREAD 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), condition, and injury(ies).)

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).

BEFORE TRAVELING DRIVER CHECKED THE TIRES AND NOTICED A NAIL IN ONE OF THE TIRES. DEALER CHECKED ALL THE TIRES AND FOUND THAT STEEL BELT WAS SEPARATING FROM ALL FOUR TIRES. *AK

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

The Privacy Act of 1974-Public Law 93-578 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.