



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

12-NOV-2003

Repository ☐

Reference No.

2004 JAN 10 2004 9:46

OWNER INFORMATION (Type or Print)

Name

Address

City

MOUNT VERNON

State TX

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?
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

☒ YES ☒ NO

Signature of Owner

Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
PLEASE PROVIDE 1G4HP54K8Y4125867

Make
BUICK

Model
LESABRE

Model Year
2000

Date Purchased
11/13/2000

Dealer's Name and Telephone Number
1-916-949-1811
Mitchell Buick Pontiac GMC

Engine:
No. Cylinders 6

Fuel Type:
GAS

Original Owner
☐

Dealer's City
San Angelo, TX

State TX

Zip Code
76901

Transmission Type

☒ Automatic

Powertrain

TRANSAXLE

Vehicle Component Code

133000 VISIBILITY: POWER WINDOW DEVICES AND CONTROLS

Multiple Failure: 1 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
26-FEB-2003

Failure Mileage
40000

Failure Speed
50 mph

2 FAILURE - RIGHT FR WINDOW
INT ARIE NC 19 OCT 02 66660
TEMPORARILY FIXED

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 DOTM15ABC036)

☐ 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), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

0

0

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).

THE ELECTRIC WINDOWS OF THE VEHICLE WOULD SLIDE DOWN, BUT WOULD NOT SLIDE UP. THE VEHICLE WAS TAKEN TO AN INDEPENDENT REPAIR SHOP WHO INFORMED THE CONSUMER THAT THE ELECTRICAL CABLE WOUND ITSELF AROUND THE MOTOR, BURNING THE MOTOR OUT. THE RIGHT FRONT AND LEFT REAR WINDOWS ARE AFFECTED. THE MANUFACTURER NOR THE DEALER IS AWARE OF THE PROBLEM.
*PH

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.

2 does
not work
properly

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

Failure 1 Driving home from grocery store.
Failure 2 Visiting friends in N.C. My friend
had a garage to temporarily repair so we could continue
travel to home.

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U.S. Department
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National Highway
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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



Metrol
National Highway
Traffic Safety
Administration
U.S. Department
of Transportation

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73178 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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QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DASH2DOT

and dial toll free at

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1-888-327-4238

DOT Auto Safety Hotline
(DASH) 2 DOT



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**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**