



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

Date Received

Od. or _____
rt. dt. _____
od. rt. _____
up. ltr. _____

Reference No.

11 6:07

2003 NOV 12
10048184

OWNER INFORMATION (Type or Print)

Name _____
Street _____ Apt. No. _____
City ARLINGTON State VA Zip Code _____

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 10/31/03

PRODUCT INFORMATION

| | | | | | |
|---|---|--|--|---|---|
| Vehicle Identification No. (VIN) (17 Digits) <u>1G2NE52T9VC830823</u> | | Make <u>PONTIAC</u> | Model <u>GRANDAM</u> | Year <u>1997</u> | |
| Purchased Date <u>09/30/97</u> | Dealer's Name <u>Sullivan's PONTIAC</u> | | Engine Size (CID/CYL) <u>4</u> | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection | |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used | Dealer's City <u>ARLINGTON HEIGHTS</u> | State <u>IL</u> | Zip Code <u>60009</u> | No. Cylinders <u>4</u> | |
| Manufacture Date (on driver's door or plate) | Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic | Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Air Bag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> 3-Point Belt | Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other |
| Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other | | | | | |

FAILED COMPONENT(S)/PART(S) INFORMATION

| | | | |
|--------------|--|---|--|
| Part Name(s) | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement | Handicap Adaptive Equip <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--------------|--|---|--|

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

| | | |
|--|---|--|
| Tire Brand <u>GOODYEAR</u> | Tire Name <u>INTEGRITY XNW100AS</u> | Complete Tire Size <u>P195/70 R14</u> |
| No. of Failures <u>1(+1?)</u> | Date(s) of Failure(s) <u>09/29/03</u> | Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Mileage at Failure(s) <u>< 100mi</u> | Vehicle Speed at Failure(s) <u>< 65 mph</u> | NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

| | | | | |
|---|--|---------------------------|----------------------|--|
| Crash <input type="checkbox"/> Yes <input type="checkbox"/> No | Fire <input type="checkbox"/> Yes <input type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Reported to Manufacturer <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|---------------------------|----------------------|--|

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

Brand new GOODYEAR tires - four, at speed > 40 mph, bang's noise.
Tire were installed by local dealer - Mr. Vito's shop. Found
at least one tire has separation. Replaced. Have another
case - noise started at left front tire.
Tire was replaced by warranty. Probably need replacement
other tires too.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

Mail postage free or fax to 202-366-7882

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

had a flat tire visited local shop - "Mr. Tize" and was recommended to replace all four, since a flat one was unreparable, and total mileage on my Firestone F570 (very good tires) was over 60,000 miles and soon it might need replacement so decided to replace all four. CAR PASSED FULL SERVICE less 100 mi before the incident. INTEGRITY GOOD YEAR was recommended as MANUFACTURER'S CHOICE in GRANDON.

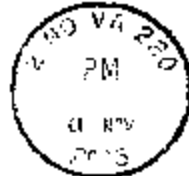
After about 100 mi driving strange noise appeared to be at speed over 60mph. "Mr. Tize" first balanced tire, finally found one deflated - SEPARATION, and replaced it under warranty. Now, after another 200 mi drive the "bang" noise came back. Seems all INTEGRITY GOOD YEAR tires are deflated. ATTACH ADDITIONAL 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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590



Complete and return or place in your car manual for future use

VEHICLE OWNER'S QUESTIONNAIRE (VOQ)

DOT AUTO SAFETY HOTLINE

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DASH 2 DOT

and dial toll free at

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