



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 100161

Date Received: 2004 FEB 24 AM 10:22
Repository:

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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: GOWRIE State: IA Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Evening Telephone Number: [REDACTED]

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: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1GZNE2E1 [REDACTED]
Make: PONTIAC Model: GRAND AM Model Year: 1999

Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: _____ Fuel Type: _____
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____

Transmission Type: Automatic Lock Brakes Cruise Control
Powertrain: [REDACTED] Vehicle Component Code: D63200 ENGINE AND ENGINE COOLING EXHAUST SYSTEM-MANIFOLD
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): _____ Failure Mileage: 62000 Failure Speed: _____

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: DOTM19A8C036): _____ 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: _____ 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 (e.g., parts repaired or replaced (and if old part is available)).

THE INTAKE MANIFOLD GASKET FAILED AND CAUSED THE VEHICLE TO OVERHEAT. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. *NM

VEHICLE COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: _____ Multiple Failure: 1

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. **ATTACH ADDITIONAL SHEETS IF NECESSARY.**
The Privacy Act of 1974 (Public Law 93-502) 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 to support of the agency's action.

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

My car started leaking engine coolant fairly bad. Took it to mechanic, he said it was intake manifold gasket. The mechanic said if not fixed motor would eventually blow, said gasket would start leaking coolant intercially. He said he has a 94b Grand Am's just this month alone. All with 60,000 to 70,000 miles. A couple which needed new motors. I think this problem should be looked at to prevent future problems, or a recall to get it fixed, to prevent a large bill to Pontiac owners.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

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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

FIRST CLASS PERMIT NO 7175 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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and dial toll free at

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