



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  
2009 FEB 26 AM 9:37  
27-JAN-2004

Repository   
Reference No.  
10065920

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City NORTH ROYALTON State OH Zip Code [REDACTED]

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

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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1G2H063L3P [REDACTED] Make PONTIAC Model BONNEVILLE Model Year 1993

Date Purchased 5-93 Dealer's Name and Telephone Number GENERAL MOTORS - PARIMA PLANT Engine: No. Cylinders 3800 Fuel Type: unleaded  
Original Owner  Dealer's City PARIMA PLANT State OH Zip Code 44129

Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain \_\_\_\_\_ Vehicle Component Code 014000 STEERING; RACK AND PINION Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) \_\_\_\_\_ Failure Mileage 105000 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: DOTM1LBAC036) \_\_\_\_\_  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; i.e. parts repaired or replaced (and if old part is available).

THE DRIVER HAD DIFFICULTY TURNING THE STEERING WHEEL IN EITHER DIRECTION. THE VEHICLE WAS TAKEN TO THE DEALER WHO STATED THE RACK AND PINION NEEDED TO BE REPLACED. PLEASE PROVIDE FURTHER DETAILS. \*JB

see reverse!  
also, I am a single mom! this will take a chunk out of my budget!  
otherwise I am happy with this car -

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 in support of the agency's action.

# VEHICLE OWNER'S QUESTIONNAIRE



DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**  
1-888-327-4236

DOT Auto Safety Hotline  
(DASH) 2 DOT



U.S. Department of Transportation  
National Highway Traffic Safety  
Administration  
http://www.nhtsa.dot.gov/whistle

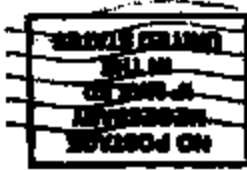


U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NHTSA-216  
400 7th Street, SW  
Washington, DC 20590

POSTAGE WILL BE PAID BY MAILING TRAFFIC SAFETY ADMIN.

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 2773 WASHINGTON, D.C.

U.S. Department  
of Transportation  
National Highway  
Traffic Safety  
Administration  
400 Seventh St., S.W.  
Washington, D.C. 20590  
Office Business  
Priority for Private Use \$300



ATTACH ADDITIONAL SHEETS IF NECESSARY

I purchased this from General Motors - PARMA Plant  
through the PEP Plan - my mom has 40 years  
at GM - PARMA Plant -  
All ~~what~~ <sup>we</sup> thought is GM - This problem started  
about 1 year ago  
When I turn to the R or L I get a  
jacking motion in the steering -  
Took to a dealer + was told it was the  
rack + pinion + needed to be replaced. This was  
expensive - I saw the article + felt if you replace  
96's the 93's could be done - I don't ~~the~~ drive ~~the~~

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

the car alot -