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 100192

Date Received: 02-FEB-2004
Repository ☐
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**OWNER INFORMATION** (Type or Print)

Name [redacted]
Address [redacted]
City: HOLLEY | State: NY | Zip Code [redacted]
Daytime Telephone Number [redacted]
Evening Telephone Number
E-mail Address

*Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?* ☒ YES ☒ NO
*In the absence of an a[redacted]ess to the vehicle manufacturer.*
Signature of Owner [redacted] Date 2/1/04

| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side | Make | Model | Model Year |
|---|---|---|---|
| 1GMDU03E31D117753 | PONTIAC | MONTANA | 2001 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: No: Cylinders | Fuel Type: |
|---|---|---|---|---|---|
| 03/01 | SPURR'S 585-637-3999 | | | | |
| Original Owner ☒ | Dealer's City: BROCKPORT | State: NY | Zip Code: 14420 | | |

| Transmission Type | | | Vehicle Component Code |
|---|---|---|---|
| | ☑ Antilock Brakes<br>☑ Cruise Control | Powertrain | 036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK<br>Multiple Failure: 1 |

**FAILED COMPONENT(S)/PART(S) INFORMATION**

| Incident Date(s) | Failure Mileage | Failure Speed | |
|---|---|---|---|
| | 40000 | | |

**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: DOTMAL9ABC036) | ☐ 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 | Fire | Number of Persons Injured | Number of Deaths | Reported to Police |
|---|---|---|---|---|
| ☒ Yes ☐ No | ☐ Yes ☒ No | 0 | 0 | Y |

**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).**

WHILE BRAKING THE ABS FAILED. AS A RESULT THE DRIVER REAR ENDED ANOTHER VEHICLE. THE DRIVER STATED THAT THE MANUFACTURER REFUSED TO ACCEPT RESPONSIBILITY FOR THE FAILURE. A POLICE REPORT WAS TAKEN AND THERE WERE NO INJURIES *NM

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

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

See attached information -

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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**
FIRST CLASS PERMIT NO 73173 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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# 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

US Department of Transportation
National Highway Traffic Safety Administration
http://www.nhtsa.dot.gov/hotline

2001 Montana
purchase date 03/12/01

Repair history:

| | | |
|---|---|---|
| 11/08/01 | mileage 11828 | creak/rubbing noise left rear wheel<br>filler neck hose rubbing against frame<br>hose repositioned |
| 05/17/02 | mileage 17928 | serpentine belt squealing intermittantly<br>sprayed belt, noise went away for a few<br>minutes then returned<br>serpentine belt replaced |
| 07/17/02 | mileage 20669 | vehicle towed into dealer due to would<br>not start when came out from work<br>positive battery terminal came right off<br>when tech checking battery<br>new battery installed |
| 10/13/03 | mileage 37969 | loud roar, like vehicle holding back<br>in passing gear has a clunk/slip<br>in reverse delays then bangs<br>Input sungear thrust bearing came apart<br>causing the transmission to malfunction<br>fluid full of metal debris, dissembled<br>transmission to find metal thru out transmission<br>installed new serta transmission assembly<br><br>new rear brakes installed |
| 12/09/03 | mileage 40318 | brakes squeeking<br>normal brake sound, brakes look great, no<br>problem found |
| 12/12/03 | mileage 40,483 | ABS and traction lights appeared on dash then<br>could not stop vehicle without proper working<br>of ABS<br>history code for at the time of accident C1234<br>for left rear wheel sensor reading 0<br>collision repairs made<br>investigation/inspection made |
| 01/30/04 | 40,492 | codes cleared, road tested again with same<br>occurring code C1234 for left rear wheel sensor<br>reading 0<br>left rear wheel hub replaced |

02/05/04 mileage 40,750 heater control inoperative, working only only on level 5
blower resistor shorted
replaced blower resistor

# MONROE COUNTY SHERIFF'S OFFICE
## TOWED VEHICLE REPORT

Teletype # (Impounded Vehicle) _____

CR# 183090 Date Towed: 12-12-03 Time: 1955HRS

Reg. # [redacted] Make PONTIAC Yr. 01

Towed From: CHILI AVE @ BEAVER RD Town: CHILI

Towed To: SAUER CHEVY By: JIM'S SERVICE

Owner's Name & Address: [redacted]

[redacted] HOLLEY Telephone _____

Reason for Towing: MVA

Is the vehicle operator the owner? ☑ Yes ☐ No

Release Authorized by: _____

Date: _____ Time: _____ (Records IBM) _____

_____ RELEASE upon presentation of proper papers

_____ HOLD for evidence/investigation

_____ HOLD until release authorized by MCSO Property Clerk

Deputy's Name and IBM#: DEP. C. WBURRITT 2050

DRIVER COPY

PB-178-97

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).