



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100182

Date Received 2004 APR -1 PM 12:15
05-MAR-2004

Repository
Reference No.
10061514

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City HOMEWOOD State IL Zip Code _____
Evening Telephone Number _____

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an owner signature, NHTSA will not provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 3/16/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at curb (R) or rear (L) of vehicle: 1G3WH52KMF342350
Make OLDSMOBILE Model INTRIGUE Model Year 1998
Date Purchased _____ Dealer's Name and Telephone Number Tony Rizzo
Original Owner Dealer's City Tinley Park State IL Zip Code _____
Engine: 3.8 L Fuel Type: Reg. Unleaded
No. Cylinders 6
Transmission Type Auto Am/lock Brakes Powertrain FWD
 Cruise Control
Vehicle Component Code 014000 STEERING: RACK AND PINION
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) June 2003
Failure Mileage 64800
Failure Speed 1-30 mph

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: DOT1M1BABC036) 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).

CONSUMER COMPLAINED ABOUT RACK AND PINION STEERING PROBLEM. A RECALL WAS ISSUED ON THIS MAKE, MODEL, AND YEAR. HOWEVER, THIS VEHICLE WAS NOT INCLUDED DUE TO VIN. *AK

See: NHTSA CAMPAIGN ID#: 03V527000

I contacted GM in early June 2003 regarding this problem.

GM RECALL NO: 03062

Problem was identified by Howe Buick dealership (Bradley, IL) as being same problem that other GM cars were being recalled for, rack + pinion unit was identified as same unit as recalled unit.
Howe Buick handles warranty work for Oldsmobile cars.

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.

**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).**