



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 100079

Date Received

2004 APR 20 AM 10:31  
16-MAR-2004

Repository

Reference No.  
10063290

OWNER INFORMATION (Type or Print)

Name

Address

City INDIANAPOLIS

State IN

Zip Code

Daytime Telephone Number

E-mail Address

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 your name or address to the vehicle manufacturer.

Signature of Owner

Date 3/30/2004

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1G3GR162X3V4109566

Make

OLDSMOBILE

Model

AURORA

Model Year

1997

Date Purchased

9/18/00

Dealer's Name and Telephone Number

Collins Oldsmobile - ADD longer in business

Engine:

No. Cylinders

V-8

Fuel Type:

Gas

Original Owner

Dealer's City

INDIANAPOLIS

State

IN

Zip Code

46201

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

072200 FUEL SYSTEM, GASOLINE:DELIVERY:HOSES, LINES/PIPING, .

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

16-MAR-2004

Failure Mileage

80,000

Failure Speed

any

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: DOTM1A9ABC036)

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).

WHILE DRIVING CONSUMER SMELLED FUEL. THE FUEL LINE SYSTEM WAS LEAKING GASOLINE, CAUSING STALLING. ENGINE WON'T START AGAIN. INDEPENDENT SHOP REPLACED THE FUEL PUMP/ PRESSURE REGULATOR. \*AK

I've had all 8 fuel injectors replaced, both O<sub>2</sub> sensors, 2 ignition coils, Fuel pump, pressure regulator, all of these replaced + my car still dies stalls, + 4 or 5 x since Jan. 2003 the fuel line has cracked causing pressure regulator to pop + causing

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.

on back

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

Fuel to shoot 2 or 3 feet in air when hood is raised. The recall for the Auroras fits the description of my problem to a 'T'. But ~~Autosmobile~~ says my VIN # isn't on recall list. Nobody is perfect & mistakes can be made & I feel somehow my VIN # was left off the recall ~~the~~ list. Can somebody please help me! I have ~~all~~ repair receipts ~~but~~ but couldn't get to a copier.

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U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Beavert 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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National Highway Traffic Safety Administration  
Washington, DC 20590



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and dial toll free in

DASH2DOT

TO REPORT SAFETY DEFECTS  
COMPLETE THE FORM  
OR

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE



VEHICLE  
OWNER'S