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

2004 APR 27 PM 2:15

FOR AGENCY USE ONLY 100184	
Date Received 29-MAR-2004	Repository ☐
	Reference No. 10065100

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City HAVERHILL	State MA	Zip Code [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 or windshield on driver's side	Make	Model	Model Year
1G8ZK82764[redacted]	SATURN	SW2	1998

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
9/02				No. Cylinders	UNLEADED
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTO	☐ Antilock Brakes ☐ Cruise Control	Powertrain	131000 VISIBILITY:WINDSHIELD
			Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
20-JAN-2004	125000		

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: DOTMALBABC036)	☐ 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	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).

THERE IS A CRACK IN THE FRONT WINDSHIELD THAT BEGINS WERE THE REAR VIEW MIRROR IS ATTACHED TO THE WINDSHIELD. ~~CONSUMER CAN NOT SEE TROUGH FRONT WINDSHIELD~~ AK VISION IS IMPAIRED. WIND SHIELD HAS BEEN CAREFULLY INSPECTED FOR PINGS AND CRACKS, NONE HAVE BEEN FOUND. SAID CRACK CLEARLY STEMS FROM THE SPOT WHERE THE REARVIEW MIRROR IS ATTACHED AND REACHES OUT TO BOTH LEFT AND RIGHT SIDES SPANNING APPX. EIGHTEEN INCHES.

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