



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 100079

Date Received

Repository ☐

28-APR-2004

Reference No.

2004 JUL 30 PM 4: 49

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OWNER INFORMATION (Type or Print)

Name

Address

City

DETROIT

State

MI

Zip

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 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 of windshield on driver's side

2G4WS52J931

Make

BUICK

Model

CENTURY

Model Year

2003

Date Purchased

4-22-03

Dealer's Name and Telephone Number

RAY LAETHEM, Pont-Buick 313-886-1700

Engine:

No: Cylinders

Fuel Type:

Other

Original Owner

☒

Dealer's City

DETROIT

State

Zip Code

48224

3. H-46

Transmission Type

☐ Antilock Brakes

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

171100 LATCHES/LOCKS/LINKAGES: DOORS: LATCH

AUTOMATIC

☒ Cruise Control

Multiple Failures

MANY TIMES

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Incident Date(s)

28-APR-2004

Failure Mileage

Failure Speed

VEHICLE NOT DRIVING WHEN FAILURE OCCURRED

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

GOOD YEAR

Tire Model (Name or Number)

SPRINT BEST

Tire Size (Example P215/65R15)

P205/70R15

DOT No. (Example: DOTM18ABC038)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Vehicle Component Code

Tire Failure Type TIRE CUT AT DEALERSHIP

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

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 DOORS LOCKING AND UNLOCKING WHILE DRIVING. DOORS ALSO, DASHBOARD WAS FALLING APART. DEALER HAD INSPECTED VEHICLE SEVERAL TIMES, BUT COULD NOT DUPLICATE OR CORRECT THE PROBLEMS. *AK

Include, if available, Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

This Privacy Act of 1974-Public Law 96-579-This information is requested pursuant to authority vested in the Federal 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. (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.)