



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

11-MAY-2004

Repository

Reference No. **AM 5:09**
10073446

OWNER INFORMATION (Type or Print)

Name

Address

City MANCHESTER

State MO

Zip Code

Daytime 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 authorized signature, you may provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 4/24/04

VEHICLE INFORMATION

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

1G3GR62CE

Make

OLDSMOBILE

Model

AURORA

Model Year

1995

Date Purchased

Fall 1999

Dealer's Name and Telephone Number

Individual Owner

Engine: 4.0L

No. Cylinders 8

Fuel Type:

Gas

Original Owner

Dealer's City

St. Louis

State

MO

Zip Code

63021

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

073100 FUEL SYSTEM, GASOLINE:FUEL INJECTION SYSTEM:FUEL RA

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

11-MAY-2004
Feb 2004

Failure Mileage

2a 122,000

Failure Speed

45 mph

strong smell of gas/fuel was shooting out of a crack in the fuel rail saturating engine compartment with fuel and fumes in fuel rail assembly

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: DOTM18BABC038)

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

0

Number of Deaths

0

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. part repaired or replaced (and if old part is available).

CONSUMER'S VEHICLE EXPERIENCED THE SAME DEFECT AS MENTIONED IN NHTSA RECALLS 04V110000: VEHICLES EQUIPPED WITH 4.0L V8 ENGINES HAVE A CONDITION IN WHICH THE NYLON TUBING USED IN THE FUEL RAIL CONSTRUCTION MAY DEGRADE AND CRACK. THIS VEHICLE NOT INCLUDED IN THE RECALL DUE TO VIN, *AK

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 Administration 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 medical summary thereof, may be used in support of the agency's action.

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

While driving less than 1 mile from home. My Wife experienced a strong gas odor

Engine compartment was saturated with fuel and gas fumes. Fuel squirts from a crack in the rear of the fuel rail and out over my head on the the pavement.

I still defective part.

In Feb 2004 the only part available for replacement was another nylon fuel rail. Stainless steel replacement not available till June 2004.

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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



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY MAILING OFFICE

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

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1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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<http://www.safercar.gov>

**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).**