



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) 2004 JUL - 6 PM 7:14  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100184

Date Received	Repository <input type="checkbox"/>
Reference No. 10073735	

**OWNER INFORMATION (Type or Print)**

Name				Daytime Telephone Number	E-mail Address
Address					
City	LAMAR	State	MO	Zip Code	

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 7/1/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1G3WH52K7WF	Make OLDSMOBILE	Model INTRIGUE	Model Year 1998
Date Purchased Dec 02	Dealer's Name and Telephone Number Village Chev. 417-358-3333		Engine: No. Cylinders 6
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code
Transmission Type Auto	<input checked="" type="checkbox"/> Anti-lock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Fuel Type: GAS
Vehicle Component Code 012200 STEERING: COLUMN LOCKING: ANTI-THEFT DEVICE		Multiple Failure: 1	

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 15-MAY-2004	Failure Mileage 100500	Failure Speed 70	
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**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: DOTM19ABC038)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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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 AT 70 MPH STEERING WHEEL LOCKED, AND CONSUMER LOST CONTROLS OF THE VEHICLE. IT SWERVED BACK AND FORTH ACROSS THE HIGHWAY. VEHICLE EVENTUALLY STOPPED IN THE MIDDLE OF THE HIGHWAY WHERE IT STALLED. AFTER A FEW SECONDS VEHICLE WAS STARTED AS IF NOTHING HAD HAPPENED. \*AK

Vehicle had spun 180° and came to a stop facing traffic that had been following it.

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.