



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 241

Date Received

Repository ☐

2004 AUG 19 PM 5:27

Reference No.
10093802

OWNER INFORMATION (Type or Print)

Name

Address

City

PALMER LAKE

State

CO

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 signature of owner, name or address to the vehicle manufacturer.

Signature of Owner

Date 8/14/04

VEHICLE INFORMATION

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

10BJW62R6YY842365

Make

SATURN

Model

LS2

Model Year

2000

Date Purchased

26-DEC-02

Dealer's Name and Telephone Number

Saturn of Chapel Hills 7M 867-6400

Engine:

No. Cylinders 8

Fuel Type:

Gas

Original Owner

Dealer's City

COLORADO SPRINGS

State

CO

Zip Code

80921

Transmission Type

AUTOMATIC

☒ Anti-lock Brakes

☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

123000 EXTERIOR LIGHTING:TAIL LIGHTS

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

23-JUL-2004

Failure Message

40382

Failure Speed

All

Tail light Assembly(ies), brake signal, running housing(lenses, framework, etc.)

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: DOTM18ABC036)

☐ 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), condition, and injury(s).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0/None/Minority

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

BOTH TAIL LIGHTS HAD TO BE REPLACED DUE TO AN UNKNOWN FAILURE. THE RIGHT SIDE WAS REPLACED BY DEALER LAST YEAR AT 40,382 MILES, AND THE LEFT SIDE WAS DONE CURRENTLY AT 55,103 MILES. *AK

Friends and spouse reported respectively on failures to owner.
(1) Reference above events. Dealer participated in cost of 1st repair. Manufacturer promises future participation.
(2) Right and then left failures noted and replacements installed (reference repair order). Potential for misdemeanor defective vehicle citation. Simultaneous failure: (i.e., left and right), potential rear collision. 1st failure(r) caused additional (brake switch/cruise) to fail.
(3) Dealer replaced respective tail light assemblies at referenced intervals. Old parts discarded. Curious about this, I asked a friend who has the same make, model and year. He reported identical circumstance with steering failure (something I dread) as well. I phoned a query.
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.

VEHICLE OWNER'S QUESTIONNAIRE



DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial-toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration
<http://www.nhtsa.dot.gov/hotline>



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NECESSARY
IF MAILED
IN THE
UNITED STATES



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

U.S. Department
of Transportation
National Highway
Traffic Safety
Administration
400 Seventh St., S.W.
Washington, D.C. 20590
Official Business
Penalty for Private Use \$300

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

Dealer sales staff recommends trading for a newer model.

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).