



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 2004 SEP 20 AM 11:46:04
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received

Repository

Reference No.
10089493

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City KNOX State IN Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of a signature or address to the vehicle manufacturer, YES NO
Signature of Owner [REDACTED] Date 9/14/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number (VIN) Located on driver's side [REDACTED]
Make BUICK Model CENTURY Model Year 2004
Date Purchased 5/28/04 Dealer's Name and Telephone Number (630)231-3122
Original Owner Dealer's City WEST CHICAGO State IL Zip Code 60185
Engine No. Cylinders 8 Fuel Type Gas
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain FRONT WHEEL DRIVE
Vehicle Component Code 020000 SUSPENSION
Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 23-AUG-2004 Failure Mileage Failure Speed 55

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: DOTM123ABC098) 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(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. parts repaired or replaced (and if old part is available).

WHILE DRIVING DRIVER'S SIDE AND PASSENGER'S SIDE WINDOWS WHEN ROLLED DOWN OR HALF WAY DOWN A LOUD VIBRATING SOUND WAS HEARD COMING FROM THE REAR. THIS CAUSED PRESSURE TO THE EARS. CONSUMER TOOK VEHICLE TO THE DEALER, AND MECHANIC INFORMED CONSUMER THAT A PROBLEM EXISTED, BUT A SOLUTION HAD NOT BEEN DETERMINED AT THIS TIME. CONSUMER HAS A SECOND ADDRESS FOR THE WINTER 108 PINE PLACE, WILDWOOD, FL 34785, 352 748 0765. *AK

THE TERRIBLE VIBRATION AND PRESSURE IS WHEN THE REAR WINDOWS ARE DOWN AND IT SEVERELY EFFECTS MY EARS AND ANY PASSENGERS. I FEEL THIS IS CERTAINLY A SAFETY DEFECT WHEN YOU ARE DRIVING! BUICK SAYS THEY HAVE "NO FIX." OVER.

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

The Privacy Act of 1974 (Public Law 93-502) 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.

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

MY CONTACT W/BUICK HAS BEEN W/ TIENE PETERS & TAMARA ERNSTER
CUSTOMER SERVICE, REFERENCE # 1-231309025.

THIS COMPLAINT HAS ALSO BEEN FILED WITH THE BETTER BUSINESS
BUREAU'S BBB AUTO LINE, CASE # ~~1-231309025~~ BUK 0450731,
1-800-955-5100.

I SINCERELY HOPE BUICK WILL COME TO A SOLUTION WITH MY
VEHICLE AND RESOLVE THE PROBLEM. IT COULD CAUSE AN
ACCIDENT.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73778 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

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

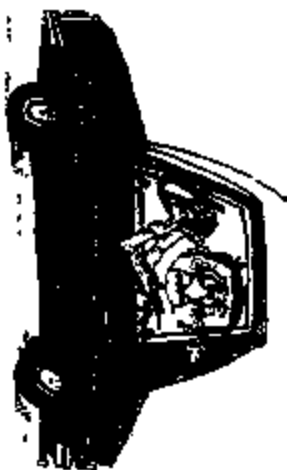
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration
NHTSA Form 3800 (Rev. 10/97)