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

2004 OCT -6 PM 2:27

FOR AGENCY USE ONLY 241	
Date Received: 27-AUG-2004	Repository ☐
	Reference No.: 10069002

OWNER INFORMATION (Type or Print)

Name: [redacted]
Address: [redacted]
City: BOARDMAN | State: OH | Zip Code: [redacted]
Daytime Telephone Number: [redacted] | Evening Telephone Number:
E-mail Address: [redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of a [redacted] WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 9/26/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1G4HR52K4WH[redacted]	BUICK	LESABRE	1997

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
15-JAN-04				No. Cylinders 8	Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	FRONT WHEEL DRIVE	053200 ENGINE AND ENGINE COOLING:EXHAUST SYSTEM:MANIFOLI Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
24-AUG-2004	~~146000~~ 100570	Parked	Manifold intake (Lower) replacement

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: DOTMAL8A8C038)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 ~~MY~~ VEHICLE COMMENCED TO RUN ROUGHLY. VEHICLE WAS PULLED OVER, AND FOUND COOLANT ~~LEAKING INTO THE~~ leaking into the ENGINE. VEHICLE WAS TOWED TO THE DEALER, WHO INFORMED CONSUMER THAT THE UPPER MANIFOLD NEEDED TO BE REPLACED. AK because of design defect in part caused fluid to be drawn into engine. This caused the engine to seize and an overhaul to be needed. We were informed that a recall had been considered by GM but scrapped because of it not being a safety factor.

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

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).