



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  
(1-888-327-4238)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received

13-SEP-2004  
AM 11:45

Repository

Reference No.  
10C91941

OWNER INFORMATION (Type or Print)

Name  
Address

Daytime Telephone Number  
Evening Telephone Number

E-mail Address

City FAIR OAKS

State CA

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 authorized signature, please print your name or address to the vehicle manufacturer.  
Signature of Owner Date 9/20/04

VEHICLE INFORMATION

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

1G3GR6ZC254

Make OLDSMOBILE

Model AURORA

Model Year 1995

Date Purchased

Dealer's Name and Telephone Number  
OLDSMOBILE INC 1 800 630 6537

Engine:  
No. Cylinders 8

Fuel Type:  
Gas

Original Owner

Dealer's City ROSELVILLE

State CA

Zip Code 48266 95661

Transmission Type  
AUTOMATIC

Antilock Brakes  
 Cruise Control

Powertrain  
REAR-WHEEL DRIVE  
FRONT

Vehicle Component Code

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

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)  
13-SEP-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: DOTM19ABC036)

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

CONSUMER RECEIVED RECALL 04-V110-000 CONCERNING FUEL RAIL TUBING. THE RECALL STATED THAT DEALER WAS RESPONSIBLE FOR TOWING. \*AK AND\*

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)

RECALL STATED "CONDITION TO BE REMEDIATED WITHOUT CHARGE TO OWNER. (NO CHARGE)  
ONSMOBILE CUSTOMER ASSISTANCE SUPERVISOR WILL NOT PAY FOR TOWING TO REPAIR/DEALER LOCATION UNLESS VEHICLE IS BROKEN (UNABLE TO BE DRIVEN) HOWEVER Fuel order component and because MANUFACTURE/DEALER STATES THAT AN ENGINE FIRE COULD OCCUR, I WILL NOT DRIVE THE VEHICLE.  
I REQUEST \$700.00 payment to me to cover TOWING AND REPAIR COST

THANK YOU

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20600

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 72173 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



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DASH2DOT  
and dial toll free at

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

DOT AUTO SAFETY HOTLINE

VEHICLE  
OWNER'S  
QUESTIONNAIRE

