



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

FDR AGENCY USE ONLY 100078

Date Received

2004 (10)  
17-SEP-2004

Repository

Reference # 31  
10082662

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City STUART State FL 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?  YES  NO  
In the absence of an authorization, NHTSA will use the name and address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 11/08/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side [REDACTED]  
Make DAEWOOD Model LANOS Model Year 2001  
Date Purchased [REDACTED] Dealer's Name and Telephone Number [REDACTED]  
Engine: No: Cylinders 4 Fuel Type: Gas  
Original Owner  Dealer's City [REDACTED] State [REDACTED] Zip Code [REDACTED]  
Transmission Type  Antilock Brakes  Cruise Control Powertrain FRONT WHEEL DRIVE  
Vehicle Component Code 060000 ENGINE AND ENGINE COOLING  
Multiple Failure: 1

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

Incident Date(s) 17-SEP-2004 Failure Mileage [REDACTED] Failure Speed [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]  
DOT No. (Example: DOTM18ABC0261)  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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 [REDACTED] Number of Deaths [REDACTED] 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 NHTSA RECALL 04V387000 REGARDING THE CRANK SHAFT POSITION SENSOR. COMPANY WAS OUT BUSINESS. NO DEALERSHIP WAS AVAILABLE. CONSUMER INDICATED THERE WAS ONLY ONE DAEWOOD DEALERSHIP IN TOWN AND THEY REFUSED TO PROVIDE HELP. \*AK

In no case, 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 condensed summary thereof, may be used in support of the agency's action.