



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

FOR AGENCY USE ONLY 1220

Date Received  
OCT 20 PM 12:38  
24-SEP-2004

Repository   
Reference No.  
10094297

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City PHILADELPHIA State PA Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]  
Evening Telephone Number [REDACTED]

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 NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 10/11/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
5Y2SL6Z864 [REDACTED] Make PONTIAC Model VIBE Model Year 2004

Date Purchased 4-24-04 Dealer's Name and Telephone Number Faulkner Pontiac G.M. 215-364-7120 Engine: No: Cylinders 4 Fuel Type: Gas  
Original Owner  Dealer's City Trevose Pa Zip Code 19053

Transmission Type Auto  Antilock Brakes  Cruise Control Powertrain [REDACTED] Vehicle Component Code 180000 VEHICLE SPEED CONTROL  
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-AUG-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 P215/65R16) [REDACTED]  
DOT No. (Example: DOTM18ABC038)  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, failure, 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).

WHILE DRIVING CONSUMER CANNOT SEE THE SPEEDOMETER NEEDLE. HOWEVER, IT IS ENCASED IN BLACK, AND THE NEEDLE ITSELF IS VERY DARK RED, WHICH MAKES IT VERY HARD TO SEE HOW FAST CONSUMER IS GOING. \*AX

on sunny days

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.