



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

FOR AGENCY USE ONLY 1220

Date Received: 15-OCT-2004  
Repository:   
Reference No: 10096941

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: DENVER State: CO 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?  
In the absence of an authorized signature, your name or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 11/1/04  
 YES  NO

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number: Located at bottom of windshield on driver's side: 1G2NW12M1W0 [Redacted]  
Make: PONTIAC Model: GRAND AM Model Year: 1998  
Date Purchased: 5/12/01 Dealer's Name and Telephone Number: Ric Kenbaugh Cadillac Co  
Original Owner:  Dealer's City: Denver State: CO Zip Code: 80203 Engine: No. Cylinders: 6 Fuel Type: Premium  
Transmission Type:  Antilock Brakes Powertrain: [Redacted] Vehicle Component Code: 111100 ELECTRICAL SYSTEM: BATTERY: CABLES  
 Cruise Control Multiple Failure: 1

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

Incident Date(s): 11-OCT-2004 Failure Mileage: 74899 Failure Speed: 75 mph

**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: DOTM19ABC036): [Redacted]  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).

WHILE DRIVING, THE DASH ILLUMINATED AND THEN SHUT DOWN. THE BATTERY CABLE CAME UNDONE. SHUTTING THE VEHICLES ELECTRICAL SYSTEM COMPLETELY DOWN. THE CONSUMER HIS WIFE, AND DOG WERE TRAPPED INSIDE THE VEHICLE. THE WINDOWS WOULD NOT COME DOWN THE DOORS WOULD NOT OPEN, THE BRAKES BECAME INOPERABLE. THEY COASTED TO THE SIDE OF THE ROAD. THE AUTOMATIC KEY BUTTON WOULD NOT WORK. ALSO THE BRAKES WENT OUT. PLEASE PROVIDE ANY FURTHER INFORMATION.

Door handles would NOT open door. BREATHING DIFFICULT. SHOULD HAVE BEEN A WAY TO EXIT AUTO!

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.