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 DEC 21 PM 12: 25

FOR AGENCY USE ONLY 1220	
Date Received: 18-NOV-2004	Repository ☐
	Reference No.: 10101333

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number [redacted]	
City: FARMINGTON HILLS	State: MI	Zip Code: [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, we cannot provide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 12/8/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
2G4WD532X81[redacted]	BUICK	LACROSSE	2005

Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
10-20-04	TAMAROFF BUICK	248-353-1300	6	
Original Owner ☒	Dealer's City: SOUTHFIELD	State: MI Zip Code: 48034		

Transmission Type		Powertrain	Vehicle Component Code
	☒ Antilock Brakes ☒ Cruise Control		135000 VISIBILITY:REARVIEW MIRRORS/DEVICES Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-OCT-2004			

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: DOTMAL9ABC096)	☐ 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			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).

THE RIGHT AND LEFT EXTERIOR MIRRORS EXPERIENCE A REFLECTION THAT IS VERTICALLY GOING THROUGH THEM. ~~HOWEVER, IT DISAPPEARS WHILE DRIVING. ALSO, THERE IS A~~ HORIZONTAL CHROME STRIP ~~THAT GOES THROUGH THE INTERIOR MIRROR WHICH IS VERY DISTRACTING.~~ "It"
there is also reflection at top of front Windshield.
these reflections are from horizontal chrome strip on Dashboard, and visible during daylight hours; causing slight distraction.

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

...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 ... are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer ... action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response ... be used in support of the agency's action.