



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 100222

Date Received

2005 FEB 16
28-DEC-2004

Repository ☐

Reference No.
10105446

OWNER INFORMATION (Type or Print)

Name

Address

City

PARAMOUNT

State CA

Zip Code

Daytime Telephone Number

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 a signature, please print the name and address to the vehicle manufacturer.

Signature of Owner

Date 2/16/05

VEHICLE INFORMATION

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

1G2WR5216Y

Make

PONTIAC

Model

GRAND PRIX

Model Year

2000

Date Purchased

11/2000

Dealer's Name and Telephone Number

Boulevard Pontiac

Engine:

No. Cylinders

Fuel Type:

Gas

Original Owner

☒

Dealer's City

Signal Hill

State

CA

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

ALL WHEEL DRIVE

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

29-OCT-2004

Failure Mileage

74000

Failure Speed

0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

The Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

The 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(es).)

Crash

☐ Yes ☒ No

Fire

☒ Yes ☐ No

Number of Persons Injured

Number of Deaths

Reported to Police

Y

Narrative Description of Incident(s), Crash(es), and Injury(es).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure, its parts repaired or replaced (and if old part is available).

THE CONSUMER'S VEHICLE CAUGHT ON FIRE WHILE IT WAS PARKED. *JB

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I drove about 2 miles from my house to a physical therapy appointment, parked my car and locked it. I proceeded in to the doctors office when I heard someone enter and state that there was a car on fire, when I looked out it was my car. There was smoke (grayish) come out from under the engine hood and a hissing sound and the smoke got more intense. The Fire Department arrived and put it out and when they arrived they thought my car was on because they heard the engine on but it wasn't. There was no smell coming from my car, never over heated or showed signs of a defect.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS

COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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REPORT MEMO
COUNTY OF LOS ANGELES - SHERIFF'S DEPARTMENT

Lakewood Station, 5130 N. Clark St.,
Lakewood, Calif.

WESTLAKE

Classification of Incident

File No.

Date of Report

10-29-84

TO GIVE OR RECEIVE ADDITIONAL INFORMATION CONCERNING
THIS INCIDENT, CALL:

(X) 866-9061, & ask for:

()
()

() TRAFFIC DETAIL
(X) DETECTIVE BUREAU
() COMPLAINT DESK
() COURT DEPUTY
()

IF MISSING PERSON RETURNS, or you learn his or her WHEREABOUTS,
please notify this Department.

RECOVERY OF PROPERTY - Promptly report recovery of property if the
recovery was not made by this Department. Notification concerning recovered
property (except vehicles), or missing persons may be made by
telephone.

RECOVERED VEHICLES - If you recover a vehicle other than through a
law enforcement agency, you **MUST** make a signed report of such recovery
at the nearest Sheriff's or police station.

• RETAIN THIS FOR REFERENCE •

SH-CR-413





