



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-DDT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100149

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**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: **CICERO** State: **IN** 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 authorized repair shop, you must provide your name or address to the vehicle manufacturer.  
Signature of Owner: [REDACTED] Date: **5/26/05**

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: **ZG4WY52M8W**  
Make: **BUICK** Model: **BUICK** Model Year: **1998**  
Date Purchased: **15-JUN-99** Dealer's Name and Telephone Number: **TOM WOOD** Engine: No. Cylinders: **6** Fuel Type: **Gas**  
Original Owner:  Dealer's City: **TIPTON** State: **IN** Zip Code: [REDACTED]  
Transmission Type: **AUTOMATIC**  Antilock Brakes  Cruise Control Powertrain: **FRONT WHEEL DRIVE**  
Vehicle Component Code: **036000 SERVICE BRAKES, HYDRAULIC: ANTILOCK**  
Multiple Failures: **1**

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

Incident Date(s): **16-NOV-2004** Failure Mileage: **71500** Failure Speed: **40**

**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: DOTM19ABC035): [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(es).)

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(es).  
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).

**CONTACT STATES: THE ANTI-LOCK BRAKES WENT OUT WHILE DRIVING ON DRY CONDITIONS. MR JOHN WAS DRIVING 40 MPH WHEN HE STARTED TO BRAKE. THE ORANGE AND RED BRAKE LIGHT CAME ON, AND IT WAS STILL ON. HE TOOK THE CAR TO THE DEALER 2-3 DAYS AFTER THE INCIDENT. THE DEALER INSPECTED THE CAR, AND TOLD MR JOHN THE NORMAL BRAKES WERE OKAY. HOWEVER, THE ANTI-LOCK BRAKES WERE NO LONGER FUNCTIONING. MR JOHN DID NOT HAVE THE ANTI-LOCK BRAKES REPAIRED SINCE THE DEALER WAS CHARGING HIM \$575.00. \*AK**

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)

The information stated on preceding page is accurate.

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 79173 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-218  
400 7th Street, SW  
Washington, DC 20590



**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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