



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 100148

Date Received

18-MAY-2005

Repository Reference No.
10121293

OWNER INFORMATION (Type or Print)

Name

Address

City
NEW YORKState
NY

Zip Code

Daytime Telephone Number

E-mail Address

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

Date

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
13BXSS4T51UMake
CADILLACModel
SEVILLEModel Year
2001Date Purchased
19-APR-04Dealer's Name and Telephone Number
CITY CADILLAC 718-786-3535Engine:
No. Cylinders 8Fuel Type:
GasOriginal Owner
Dealer's City
LONG ISLAND CITYState
NYZip Code
11101Transmission Type
AUTOMATIC Anti-lock Brakes
 Cruise ControlPowertrain
FRONT WHEEL DRIVEVehicle Component Code
036000 SERVICE BRAKES, HYDRAULIC; ANTILOCK

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
17-OCT-2004
to presentFailure Mileage
31000Failure Speed
VARIESTHE TRACTION CONTROL LIGHT COMES ON
FREQUENTLY WHILE CAR IS DRIVING

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: DOTM18ABC036)

 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 accident, failure(s), crash(es), and injury(ies).)

Crash

 Yes No

Fire

 Yes No

Number of Persons Injured

Number of Deaths

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).

CONSUMER STATES: THE TRACTION CONTROL SYSTEM KEEPS SHOWING A DEFECT WHEN THE LIGHT COMES ON. TOOK VEHICLE TO DEALER
4 TIMES, AND THEY COULDN'T FIND ANYTHING. ACCORDING TO OWNERS MANUAL IT HAS TO DO WITH THE BRAKE SYSTEM. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices.

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)

AS DESCRIBED ON OTHER SIDE, THE TRACTION CONTROL LIGHT CONTINUES TO COME ON AND THE DEALER HAS BEEN UNABLE TO REPAIR OR DETERMINE CAUSE. THIS CREATES POTENTIAL DANGER TO SELF AND OTHERS IF THE LIGHT SIGNALS A PROBLEM. IF NEEDED I CAN SUPPLY EVIDENCE OF THE NUMBER OF TIMES THE DEALER HAS HAD THE - 5 TIMES NOW - FOR A TOTAL UP MORE THAN TWO WEEKS.

AT EACH 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-218
400 7th Street, SW
Washington, DC 20590

20590-0000



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS

COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

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1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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