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

2005 AUG 30 AM 5:37

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
	Reference No. 10130286

OWNER INFORMATION (Type or Print)

Name			
Address		Daytime Telephone Number	E-mail Address
City: FOLLANSBEE	State: WV	Zip Code:	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 [illegible] name or address to the vehicle manufacturer.
Signature of Owner: Date: 08/04/05

VEHICLE INFORMATION

17-digit Vehicle Identification Number (plate at bottom of windshield on driver's side)	Make	Model	Model Year
2G4WB52KX	BUICK	REGAL	2000 1899

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
12-APR-05				No. Cylinders: 8	Gas
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	FRONT WHEEL DRIVE	034200 SERVICE BRAKES, HYDRAULIC:FOUNDATION COMPONENTS Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
25-JUL-2005	~~148000~~ 153,000	65 mph	PA PARKWAY- RED BRAKE LIGHT CAME ON- FLUID EMPTY

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: DOTMB1SABC036)	☐ 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

Crash	Fire	Number of Persons Involved	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., truck repaired or replaced) (and if old part is available).

PT: CALLER STATED BRAKE LINES AND FUEL LINES WERE RUSTY. CALLER'S WIFE WAS DRIVING AND THE BRAKE LIGHT CAME ON, AND WHEN CALLER CHECKED, THERE WAS NO FLUID IN THE MASTER CYLINDER. THE BRAKE PEDAL WENT TO THE FLOOR. CALLER FOUND A HOLE IN THE FRONT BRAKE LINE. CALLER NOTICED THAT THE FUEL LINE WAS RUSTING AS WELL. DEALER AND MANUFACTURER STATED WARRANTY EXPIRED, AND THERE WAS NOTHING THEY COULD DO FOR HIM. CALLER WAS TAKING VEHICLE TO A MECHANIC TO GET THE FRONT BRAKE LINE FIXED. *AK

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

THE ATTACHMENTS TO THIS DOCUMENT HAVE BEEN REMOVED TO PROTECT UNWARRANTED INVASION OF PERSONAL PRIVACY PURSUANT TO EXEMPTION 6 OF THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6).