



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-HELP
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received 11-AUG-2005
Repository ☐
Reference No. 10132507

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City PITTSBURGH State PA 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 authorization, NHTSA will not provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 8/20/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
2G4WC5322 [REDACTED]
Make BUICK Model LACROSSE Model Year 2005

Date Purchased 01-JUL-05 Dealer's Name and Telephone Number KENNY ROSS BUICK CHEVROLET 724-452-7200
Original Owner ☒ Dealer's City ZELLENOPLE State PA Zip Code 16063
Engine: No. Cylinders 6 Fuel Type: Gas

Transmission Type AUTOMATIC ☐ Antilock Brakes ☒ Cruise Control ☒ Powertrain FRONT WHEEL DRIVE
Vehicle Component Code 160000 STRUCTURE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-JUL-2005 Failure Mileage 75 miles Failure Speed [REDACTED]
6-28-05

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: DOTM1A9ABC036) ☐ 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), condition, and injury(ies).)

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(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).

DT: THE CONTACT OWNS A 2005 BUICK LACROSSE. HE CONTACTED NHTSA LAST WEEK COMPLAINING THAT WHILE DRIVING AND LOOKING IN THE SIDE MIRROR THERE IS A NARROW CHROME STRIP ON THE DASHBOARD. WHEN THE WINDOWS ARE UP ONE CAN SEE A REFLECTION. THIS IS A DISTRACTION, AND IF A MOTORCYCLE IS RIGHT IN THAT REFLECTION ONE MAY NOT BE ABLE TO SEE IT. *AK

I TOOK THE CAR TO DON ALLEN - 5315 BAUM BOULEVARD. MY CONCERN WAS VERIFIED.

AFTER TALKING TO 4 DIFFERENT PEOPLE AT KENNY ROSS, AND THEM GETTING BACK TO ME, 4 TO 5 WEEK LATER, HOWARD BOUGHTER (SERVICE MANAGER) SAT IN A LACROSSE, IN THEIR CAR LOT AND SEEN THE REFLECTION.

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) The 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.

OVER

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

WITH ALL THE TECHNOLOGY BUICK HAS IN MAKING NEW CARS, THEY SURELY SHOULD BE ABLE TO REPLACE THE CHROME STRIP WITH A BLACK OR GRAY STRIP FOR MY CAR. I DON'T WANT TO SEE ANYONE GET HURT OVER THIS.

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

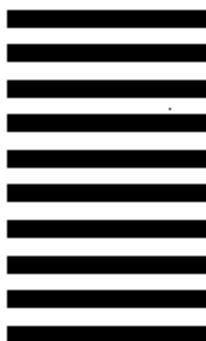
BUSINESS REPLY MAIL

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, NHTSA-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

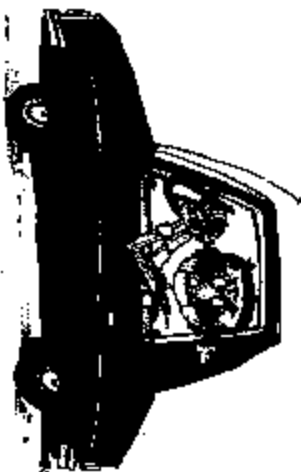
DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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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).