



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

Repository ☐

06-SEP-2005

Reference No.  
10135459

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City SOUTH VIENNA State OH Zip Code [REDACTED]

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 an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 11/11/05

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
1G2NE52G05M [REDACTED] Make PONTIAC Model GRAND AM Model Year 2005  
Date Purchased 09-JUN-05 Dealer's Name and Telephone Number COUGHLIN PONTIAC Engine: No: Cylinders 4 Fuel Type: Gas  
Original Owner ☒ Dealer's City LONDON State OH Zip Code 43140  
Transmission Type ☒ Antilock Brakes Powertrain Vehicle Component Code  
AUTOMATIC ☒ Cruise Control FRONT WHEEL DRIVE 221200 SEATS: FRONT ASSEMBLY: RECLINER  
Multiple Failure: 1

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

Incident Date(s) 04-SEP-2005 Failure Mileage 23000 Failure Speed 55

**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: DOTM19ABC036) ☐ Original Equipment Failure Location:  
☐ Prior Repair  
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 incident(s), 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).

DT: 2005 PONTIAC GRAND AM. THE CONSUMER STATES WHEN HITTING A TELEPHONE POLE AT 55 MPH THE BATTERY THAT WAS BEING  
STORED IN THE TRUNK CAME THROUGH THE BACK SEAT. THIS WAS NOT A FOLD DOWN SEAT. THE CONSUMER THOUGHT THE SEAT WAS NOT  
STRONG ENOUGH DURING A CRASH. THERE WERE NO INJURIES DUE TO THIS PROBLEM. THERE WAS A CRASH BUT NOT AS A RESULT OF THE  
BATTERY COMING THROUGH THE SEAT. \*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)

Accident occurred September 4, 2005 Trunk,  
There was a regular size battery stored in the ~~trunk~~  
where car crashed into the pole.  
The battery came thru the seat and  
landed on the front passenger seat.

"the battery went thru the bottom of where your back  
seats sets and the top of where you sit."  
The area that it went thru is where the  
baby's car seat sets.  
Questions call [REDACTED] Thank You

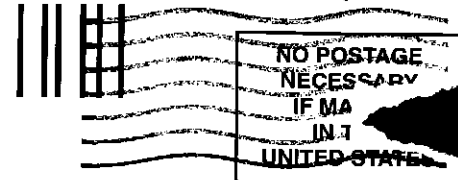
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of Transportation

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



**VEHICLE  
OWNER'S**

**QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

**TO REPORT VEHICLE SAFETY DEFECTS**

**COMPLETE THIS FORM**

**OR**

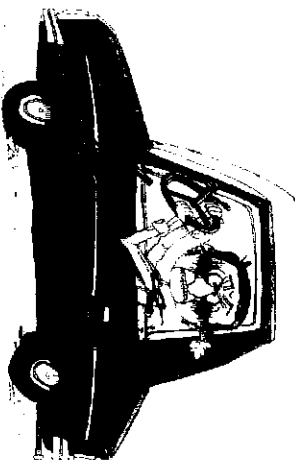
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and dial toll free at

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