



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: 2005 OCT 26 AM 9:29
18-SEP-2005

Repository
Reference No. 10136890

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: GAGESTOWN State: MI Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] 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 [REDACTED] provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 10/15/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1C4CW32 [REDACTED]
Make: BUICK Model: PARK AVENUE Model Year: 1972
Date Purchased: Dealer's Name and Telephone Number: Engine: No. Cylinders: 8 Fuel Type: Gas
Original Owner: Dealer's City: State: Zip Code:
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 161000 STRUCTURE:FRAME AND MEMBERS
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 17-SEP-2005
Failure Mileage: Failure Speed:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: Tire Model (Name or Number): Tire Size (Example P215/85R15):
DOT No. (Example: DOTM19ABC036): 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 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: 1998 BUICK PARK AVENUE. THE CONSUMER STATED THE CRADLE ON THE FRONT END ROTTED. THE VEHICLE WAS NOT DRIVING CORRECTLY. THE CONSUMER JACKED IT UP AND NOTICED THE FRAME WAS ROTTED. THE VEHICLE HAS NOT BEEN TAKEN TO A DEALERSHIP; HE DID NOT FEEL IT WAS TO DRIVE ANYMORE. THE DEALERSHIP STATED THERE WERE NO RECALLS, AND THE MANUFACTURER TOLD HIM THE SAMETHING. ALSO, THE VEHICLE WAS OUT OF WARRANTY FOR RUJST. THE CONSUMER FILED A COMPLAINT WITH BUICK, #1-383337234. *AK

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

The Privacy Act of 1974, Public Law 93-578 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)

THIS FRAME HOLDS ALL THE MAJOR DRIVEN COMPONENTS OF THIS AUTOMOBILE, ENGINE, TRANSMISSION, STEERING, DRIVEN, AND FRONT WHEELS. THIS COMPONENT SHOULD BE THE LAST COMPONENT THAT YOU WOULD EXPECT TO FAIL BECAUSE OF ITS IMPORTANCE ~~TO~~ TO THE ^{SAFE} OPERATION OF THIS VEHICLE

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, 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

DASH2DOT

and dial toll free at

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