



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 DEC 7 PM
07-NOV-2005

Repository

Reference No.
10141865

OWNER INFORMATION (Type or Print)

Name

Address

City

State MN

Zip Code

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?
(In the absence of an express statement, NHTSA will not release your name or address to the vehicle manufacturer.)

YES

NO

Signature of Owner

Date 11/2/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of window on driver's side

1G2NE52

Make

PONTIAC

Model

GRAND AM

Model Year

1998

Date Purchased
25-OCT-80

Dealer's Name and Telephone Number

Cubs Cars

507 332 2616

Engine:

No. Cylinders 4

Fuel Type:

Gas

Original Owner

Dealer's City

Faribault

State

MN

Zip Code

55021

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

021210 SUSPENSION: FRONT: SPRINGS: COIL SPRINGS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

13-JUL-2005

Failure Mileage

77,448

Failure Speed

0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/B5R15)

DOT No. (Example: DOTM19ABC036)

Original Equipment

Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type No tire failure

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 crash(es), fire(s), casualty, and injury.)

Crash

Yes No

Fire

Yes No

Number of Persons Injured

1

Number of Deaths

1

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 STATED WHILE HAVING NEW TIRES PUT ON VEHICLE AT A NEARBY GARAGE THE FRONT COIL SPRINGS BROKE. THE VEHICLE HAS NOT BEEN TO A REPAIR SHOP OR DEALERSHIP. NO REPAIRS HAVE BEEN MADE AT THIS TIME. *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)

Front Coil Spring (drivers side) broke when the car was at a tire shop for new front tires. While on hoist spring broke.

I didn't get too concerned until my daughter experienced the same problem with her 99 Grand Am while she was driving hers at the time (same side). So I think GM has a problem with their coil springs. She hasn't called the US Department of Transportation as yet 11/29/05

I did call GM about the problem he told me that they don't have any recalls or any records on this problem

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

ST PAUL MN 551

30 NOV 2005 PM 4 T



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**

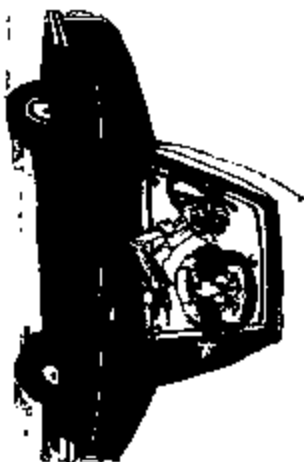
DASH2DOT

and dial toll free at

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(DASH) 2 DOT



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