



State of Wisconsin
Jim Doyle, Governor

Department of Agriculture, Trade and Consumer Protection

Rod Nilsestuen, Secretary

February 28, 2006

10154134

GENERAL MOTORS CORP
PO BOX 33170
DETROIT MI 48232-5170

RE: File 463528 (Refer to this number when contacting our agency)

[REDACTED]
CROSS PLAINS WI [REDACTED]

hh & ll 22 00 2006

Dear Sir/Madam:

I received a complaint from [REDACTED] concerning an unsatisfactory transaction with your business.

I am providing you with an opportunity to review and comment on this matter before we investigate further. After reviewing the complaint, please send your written response to [REDACTED] and to our office within two weeks.

In your response, please include a statement as to your position regarding resolution of this complaint. Your written response is important so your position can be included in the Department's permanent record.

Thank you for your cooperation and prompt response.

Sincerely,

Austin Marie Palmer
Consumer Specialist
BUREAU OF CONSUMER PROTECTION
Fax: 608 224-4939
E-mail: Austin.Palmer@datcp.state.wi.us

cc: NHTSA

AMC
2006
3/28/06



Department of Agriculture, Trade and Consumer Protection

JAN 27 2005

Motor Vehicle Repair

Please attach copies of copies (photocopies) of all documentation that supports your complaint, such as: invoices, receipts, contracts, cancelled checks, advertisements, lease documents, telephone bills.

1. How do we contact you?

Name: (Mr.) Mrs. Miss Ms. [REDACTED] [REDACTED] [REDACTED]
(circle one) (first) (middle) (last)

Home Phone: [REDACTED] Work Phone: () Same ext. Email: _____

Phone me between 8:00 A.M. and 4:00 P.M. at: (circle one) Home Work Best time: 9:00 A.M.

Address: [REDACTED] PO Box: _____ Apt. # _____

City: CROSS PLAINS State: WI Zip: [REDACTED] County: DANE

2. What business is your complaint against?

Name of business or repair shop: ART REPAIR GENERAL MOTORS

Address: 220 3RD ST PO Box: _____ Apt. # _____

City: WAUWATERS State: IOWA Zip: 51576 County: ?

Phone: (412) 566-2976 Name of person you talked to: MARK VALERA Title: CUSTOMER SERVICE
FRAN SANDER Title: OWNER

Information about your complaint

3. Date of transaction: Month: NOVEMBER Day: 4 Year: 2005

4. How old is the person who had contact with the business? Age: (circle one) 0-7 18-61 62 or older

5. Type of vehicle involved: Make: BUICK Model: LE SABRE Year: 2001

VIN#: LG4HP5 [REDACTED]

6. At the time of the repair, was the vehicle covered by a salvage certificate? Yes No

7. How did you deliver your vehicle to the shop? Drove it in It was towed It was towed and I was along

8. What repairs did you ask the shop to do? REPLACE TRANSMISSION

9. Were instructions written on the original repair order? Yes No

10. How did you first order the repairs? By telephone In person, by speaking to a shop representative

By written instructions Other, explain _____

11. Did you receive a price estimate before the work was started? Yes No

If yes: List amount of estimate \$ 1770 + TX

Was the estimate written on the original repair order? Yes No

Did you sign the estimate section of the work order? Yes No

12. Did you receive a copy of the original repair order before repairs were started? (enclose copy if available) Yes No

13. Were additional repairs performed? Yes No

If yes: List the additional repairs: _____

Did the shop provide a new total estimate for all repairs? Yes No

Did you approve the additional repairs? Yes No

How did you approve? By phone In person

14. In your opinion, did the shop: Recommend repairs that were not needed? Yes No

Make repairs without permission? Yes No

Force you to pay for repairs that were done without your permission? Yes No

Fail to return replaced parts upon request? Yes No

Charge for repairs that were not made? Yes No

Charge for repairs that were not needed? Yes No

Fail to perform the repairs in a satisfactory manner? Yes No

Refuse to honor a written guarantee? Yes No

15. Was the final repair bill (excluding sales tax and towing) more than the amount you authorized? Yes No
16. List the amount of the final repair bill: 1777 ^{Dealer made 3.00 charge on bill} \$ (excluding sales tax and towing)
17. When repairs were finished, did you receive a final invoice itemizing the parts and labor? (attach copy) Yes No
18. Did you contact the business about your complaint? Yes No When? 11-10-2005 What happened? GEN. MOTORS BUICK DIV. Turned it down because it wasn't repaired at Agency name? _____ What happened? G.M. Facility
19. Have you filed this complaint with another agency? Yes No
20. Have you contacted a private attorney? Yes No Have you started court action? Yes No

21. Describe your complaint in detail. (Please provide two copies of any papers, including the invoices, contracts, proof of payment, warranties.) Attach additional sheets if necessary. My problem is with General Motors not

the repair shop. I was returning from Lincoln, Neb. when my Transcendia blew, on highway 80 near Underwood, Ia. Traveling about 65 MPH, a nice lady stopped and gave me a ride to the A-1 Repair shop in Underwood, Ia. about 10-15 miles from my car. They towed my car to their shop and found that the Transcendia was destroyed. I was at their mercy and after the estimate, told them to replace it. They worked until 8:30 P.M. to get replaced. They were very nice and cooperative in helping me. I had to stay overnight in Council Bluffs Ia. I checked with the dealer I purchased the car from and immediately had to pay 36,000 more. I called G.M. Buick Division and after 3 weeks, they advised me that I didn't have it repaired at a G.M. facility, I said it was rejected. I feel something should be done, because the car only had 39,559 miles on it and a Transcendia should surely last longer! I had no idea that I would have to have it repaired at a G.M. Facility or I would have done so. When you're stranded 400 miles from home, it gave me no choice but to get help where available. Your help in this matter will be greatly appreciated.

22. How do you feel your complaint should be resolved? (please be specific)

I feel General Motors should assume some responsibility in the repair cost. I've had at least 12 G.M. Cars over the years and this would be my last. (I have attached a sheet with the person I talked to at General Motors)

This complaint and the information you provide will be used in efforts to resolve your problem and will typically be shared with the party complained against. It may also be used to enforce applicable state laws. Under Wisconsin's Open Records Law, this complaint will be available for public review upon request, after this department's action is completed.

The above information is true and accurate to the best of my knowledge.

Your signature: _____

Date: 1-24-2006

Return this form and two copies of your papers to our office located nearest to the business:

NORTHWEST REGIONAL OFFICE 360 Oakwood Hills Pkwy Eau Claire WI 54701 FAX: (715) 839-1645	SOUTHEAST REGIONAL OFFICE 10930 W Potter Rd. Ste C Milwaukee WI 53226-3450 (414) 266-1231 FAX: (414) 266-1235	NORTHEAST REGIONAL OFFICE 200 N Jefferson St. Ste 146A Green Bay WI 54301 (920) 448-5100 FAX: (920) 448-5118	CONSUMER INFORMATION CENTER 2881 Agriculture Dr PO Box 8911 Madison WI 53708-8911 (608) 224-4776 CFAX: (608) 224-4739
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If the business is located outside of Wisconsin return this form to our Consumer Information Center.

Toll free in WI: (800) 422-7128

FAX: (608) 224-4737
TDD: (608) 224-5058

EMAIL: datcp hotline@datcp.state.wi.us
WEBSITE: www.datcp.state.wi.us

GENERAL MOTORS

CONTACTS

Buick Div.

PHONE# 1-866-942-4348

EX# 45122

MARK VALERA

File# 1-373-830-843

**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).**