



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: 06 MAY -3 AM '06
30-MAY-2006
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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: LANSING State: NY 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: _____ Date: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G2NF52E7Y [REDACTED]
Make: PONTIAC Model: GRAND AM Model Year: 2000
Date Purchased: 01-NOV-00 Dealer's Name and Telephone Number: CUTTING MOTORS Engine: No: Cylinders 5 Fuel Type: Gas
Original Owner: Dealer's City: ITHACA State: NY Zip Code: [REDACTED]
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: FRONT WHEEL DRIVE
Vehicle Component Code: 116300 ELECTRICAL SYSTEM:IGNITION:ANTI-THEFT CONTROLLER
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 30-MAY-2006 Failure Mileage: 45000 Failure Speed: 0

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: DOTMALSABC036): [REDACTED] 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), crash(es), and injury(ies).)

Crash: Yes No Fire: Yes No
Number of Persons Injured: 0 Number of Deaths: 0 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 WHEN THE ANTI-THEFT CONTROLLER LIGHT ILLUMINATED THE VEHICLE FAILED TO START UPON THE FIRST ATTEMPT. AFTER WAITING TEN MINUTES AND TURNING THE IGNITION ON A SECOND TIME THE VEHICLE STARTED. THE PROBLEM OCCURRED INTERMITTENTLY. UPON INSPECTION THE DEALERSHIP DETERMINED THE ANTI-THEFT CONTROLLER SENSOR NEEDED TO BE REPLACED.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices. 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 responses 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 responses, 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)

ABOUT 1 OUT OF 5 START ATTEMPTS RESULTS IN THIS
PROBLEM, APPARENTLY, THIS IS A COMMON PROBLEM WITH
THIS MODEL, BUT THE DEALER SAYS THERE IS NO RECALL.

IF I NEEDED TO GET THE CAR STARTED IN AN
EMERGENCY, AND IT WOULDN'T START BECAUSE OF THIS
DEFECT, WOULD THE MANUFACTURER BE LIABLE FOR
ANY CONSEQUENCES?

- THANK YOU

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

ROCHESTER NY 146

12 JUN 2006 PM 1:17



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-210
400 7th Street, SW
Washington, DC 20590



**Think your vehicle
has a safety defect?**



Hi so:

**Use the enclosed
form to file a report.**

or visit

www.safercar.gov

or call

Vehicle safety hotline

888-327-4296



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