

U.S. Department  
of TransportationNational Highway  
Traffic Safety  
Administration

# Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS  
888-327-4236  
www.safercar.gov

## OWNER INFORMATION (Type or Print)

Name			Daytime Telephone Number		
Street No.			Apt. No.		
City			State		
Zip Code			E-mail		
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of authorization, NHTSA will contact the manufacturer only during a defect investigation or when you make a complaint about recall performance on your vehicle.			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
Signature of Owner			Date		

## VEHICLE INFORMATION

17 digit Vehicle Identification number located at bottom of windshield on driver's side		Make	Model	Year	Current Mileage
1G2WP52K121F		Pontiac	Grand Prix	2001	105,000
Date Purchased	Dealer's Name and Telephone Number		Engine	Fuel Type:	
6/27/05	Discount Tire Co 806-356-8383			<input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid	
<input type="checkbox"/> Original Owner	Dealer's City	State	Zip Code	No. Cylinders	<input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other
	Amarillo	TX	79109	6	
Transmission Type		Powertrain		Rear-wheel Drive	
<input type="checkbox"/> Manual		<input type="checkbox"/> All-wheel Drive		<input type="checkbox"/> Four-wheel Drive	
<input checked="" type="checkbox"/> Automatic		<input checked="" type="checkbox"/> Front-wheel Drive			
<input checked="" type="checkbox"/> Antilock Brakes		<input type="checkbox"/> Cruise Control			

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

Component Name	Incident Date(s)	Failure Mileage	Failure Speed	Failure Location
				<input type="checkbox"/> Driver <input type="checkbox"/> Passenger
				<input type="checkbox"/> Front <input type="checkbox"/> Rear

## ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make/Brand	Tire Model/Line	Tire Name	Tire Size (Example: P215/60R1105)	DOT No. (Example: DOT MALBABC088 on sidewall)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair
Continental	General Tearing	A/S	P225/60 R16	A3X0 3HL 3301	
Failed Structure					
<input type="checkbox"/> Tread <input type="checkbox"/> Sidewall <input type="checkbox"/> Bead					
Failure Type:					
<input type="checkbox"/> Blowout <input type="checkbox"/> Blister <input type="checkbox"/> Crack <input type="checkbox"/> Torn <input type="checkbox"/> Tread Separation <input type="checkbox"/> Road Hazard <input type="checkbox"/> Out of Round					

## ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make	Date Manufactured	Model Number and Name
Seat Type		Installed in Vehicle using the:
<input type="checkbox"/> Infant <input type="checkbox"/> Booster <input type="checkbox"/> Integrated <input type="checkbox"/> Convertible <input type="checkbox"/> Other		<input type="checkbox"/> Vehicle safety belt
Failed Part Describe Failure Below		<input type="checkbox"/> LATCH system* <small>*Vehicle info required</small>
<input type="checkbox"/> Base <input type="checkbox"/> Harness/Buckle <input type="checkbox"/> LATCH Connector <input type="checkbox"/> Shell <input type="checkbox"/> Handle <input type="checkbox"/> Other		

## APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(es).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Police Report No.
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(es).

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7862