



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 20-NOV-2006  
Repository   
Reference No. 10173840

**OWNER INFORMATION (Type or Print)**

Name [Redacted]  
Address [Redacted]  
City HOUSTON State TX Zip Code [Redacted]  
Daytime Telephone Number [Redacted] E-mail Address [Redacted]  
Evening Telephone Number [Redacted]

Signature of Owner [Redacted] Date 11/20/06

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: W06VR54R8YF [Redacted]  
Make CADILLAC Model CATERA Model Year 2000  
Date Purchased 02-JUL-03 Dealer's Name and Telephone Number HALIFAX AUTO Engine: No: Cylinders 6 Fuel Type: Gas  
Original Owner  Dealer's City PASADENA State TX Zip Code [Redacted]  
Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain REAR WHEEL DRIVE  
Vehicle Component Code 036100 SERVICE BRAKES, HYDRAULIC:ANTILOCK:CONTROL UNIT/M  
Multiple Failure: 1

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

Incident Date(s) 20-AUG 2006 Failure Mileage 88000 Failure Speed 60

**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: DOTMAL9ABC036)  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 [Redacted] Number of Deaths [Redacted] 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 DRIVING 60 MPH, THE ABS LIGHT ILLUMINATED AND THE SPEEDOMETER WAS INOPERABLE. THE VEHICLE WAS DRIVEN TO THE DEALER WHO DETERMINED THE BRAKE AND TRACTION CONTROL MODULE NEEDED TO BE REPLACED.

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

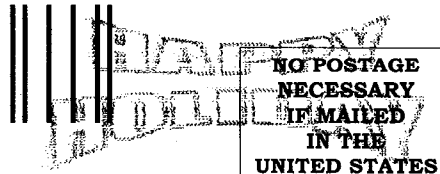
This particular vehicle also had numerous automatic leveling failures as well as incidents with the air bag not working. None of the components for this vehicle are readily available everything has to be ordered from Germany and takes several weeks if not months to receive. As with the (EBTCM) Electronic BRAKE and Traction Control module the average wait is 6 months for a replacement. This does control the way the vehicle handles & brakes as well as the ABS and Speed Omeeter & Cruise Control.

DOT  
NATIONAL HIGHWAY  
TRAFFIC SAFETY ADM  
400 7TH ST SW  
WASHINGTON DC 20590

OFFICIAL BUSINESS

HOUSTON TX 772

DEC 2005 PM 5 L



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE



US DEPARTMENT OF TRANSPORTATION  
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION  
OFFICE OF DEFECTS INVESTIGATION, NVS-210  
400 7TH ST SW  
WASHINGTON DC 20077-8214



Think your vehicle has a safety defect?



If so:

Use the enclosed form to file a report.

or visit:

[www.safercar.gov](http://www.safercar.gov)

or call:

Vehicle Safety Hotline  
**888-327-4236**

[www.nhtsa.gov](http://www.nhtsa.gov)

**NHTSA**

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