



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

12 11 9:40  
 30-NOV-2006

Repository

Reference No.  
 10174836

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
 Address [REDACTED]  
 City OAKLAND State CA 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?  
 In the absence of an answer, this report will be sent to the vehicle manufacturer.  YES  NO  
 Signature of Owner [REDACTED] Date 12/21/06

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: KLATB5264X [REDACTED]  
 Make: DAEWOO PUERTO RICO Model: ~~LEGANZA~~ Lanos Model Year: 1999  
 Date Purchased: 01-DEC-01 Dealer's Name and Telephone Number: [REDACTED] Engine: No: Cylinders 4 Fuel Type: Gas  
 Original Owner:  Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]  
 Transmission Type: MANUAL  Antilock Brakes  Cruise Control Powertrain: FRONT WHEEL DRIVE Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING  
 Multiple Failure: 1

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

Incident Date(s): 26-NOV-2006 Failure Mileage: 75000 Failure Speed: [REDACTED]

**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: DOTM9ABC036): [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 THE VEHICLE HAD A NHTSA RECALL #04V357000 ON THE TIMING CHAIN. THE SERVICE DEALER REFUSED TO PERFORM THE RECALL WORK. AFTER COMMUNICATING BETWEEN THE DEALER AND THE MANUFACTURER FOR OVER ONE MONTH, THE TIMING CHAIN FRACTURED.

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)

 refused to do the recall

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

OAKLAND CA 94

21 DEC 2006 PM 5

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**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**

Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration

**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).**