



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

Repository ☐

17 FEB 22 AM 9:40
19-JAN-2007

Reference No.
10179103

OWNER INFORMATION (Type or Print)

Name **[REDACTED]**
Address **[REDACTED]**
City ESTERO State FL Zip Code **[REDACTED]**

Daytime Telephone Number **[REDACTED]**

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an authorized signature, NHTSA will NOT provide your name or address to the vehicle manufacturer.
Signature of Owner **[REDACTED]** Date 2/8/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side **[REDACTED]**
Make OLDSMOBILE Model ALERO Model Year 2002
Date Purchased 29-DEC-06 Dealer's Name and Telephone Number BUDGET CAR SALES 239-433-1886 Engine: No: Cylinders 4 Fuel Type: Gas
Original Owner ☐ Dealer's City FORT MEYERS State FL Zip Code 33907
Transmission Type AUTOMATIC ☒ Antilock Brakes ☒ Cruise Control Powertrain REAR WHEEL DRIVE
Vehicle Component Code 341000 COMMUNICATIONS:HORN ASSEMBLY
Multiple Failure: 5

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 08-JAN-2007 Failure Mileage 70200 Failure Speed 0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make Tire Model (Name or Number) Tire Size (Example P215/65R15)
DOT No. (Example: DOTM9ABC036) ☐ Original Equipment ☐ Prior Repair Failure Location:
Tire Component Code Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: Date Manufactured: Model No./Name:
Seat Type: Installation System:
Child Seat Component Code: Failed Part:

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).

TL* - THE CONTACT STATED THAT HE PURCHASED A 2002 OLDSMOBILE ALERO AND THE HORN WOULD SOUND AT ANYTIME. THE CONTACT STATED THAT HE HAD TO TAKE THE FUSE OUT OF THE HORN TO KEEP IT FROM SOUNDING. THE CONTACT TOOK THE VEHICLE TO A REPAIR SHOP AND WAS TOLD THAT THE VEHICLE HAD A DEFECTIVE HORN PAD AND THAT THE STEERING COLUMN AND AIRBAG WOULD ALSO NEED TO BE REPLACED IF THE HORN PAD IS REPLACED. THE VEHICLE HAD APPROXIMATELY 70,000 MILES AT THE TIME OF THE FAILURE. *JB

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 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)

TOOK CAR BACK TO DEALER. DEALER HAD HORN REPAIRED AT HIS EXPENSE.
HORN IS WORKING OK NOW. (THIS WAS A SAFETY ISSUE)

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

OFFICIAL BUSINESS

FORT MYERS FL 3

08 FEB 2007 PM 3



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

or call:

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

www.nhtsa.gov
NHTSA

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

