



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

2007 APR 23 AM 7:41  
 13-MAR-2007

Reference No.  
10184979

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]

Address [REDACTED]

City DIAMOND BAR

State CA

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 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  
 YS3EF58Z3Y3 [REDACTED]

Make  
SAAB

Model  
9-5

Model Year  
2001

Date Purchased

Dealer's Name and Telephone Number  
FAMILY HONDA 866-865-5843

Engine:  
No: Cylinders 6

Fuel Type:  
Gas

Original Owner

Dealer's City  
RANCHO SANTA MARGARITA

State  
CA

Zip Code  
92686

Transmission Type  
AUTOMATIC

Antilock Brakes  
 Cruise Control

Powertrain  
FRONT WHEEL DRIVE

Vehicle Component Code  
116200 ELECTRICAL SYSTEM:IGNITION:MODULE  
Multiple Failure: 1

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

Incident Date(s)  
13-MAR-2007

Failure Mileage  
102467

Failure Speed  
10

**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: DOTM19ABC036)

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, failure(s), condition and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

Yes  No

Yes  No

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 OWNS A 2000 SAAB 9-5. THE CONTACT STATED THAT WHEN HE CALLED THE TOLL FREE NUMBER NOTED ON THE SAFETY RECALL #05V399000 FOR THE ELECTRICAL SYSTEM:IGNITION:MODULE, AND PROVIDED THE VIN HE WAS TOLD THAT SOMEONE WOULD GET BACK TO HIM. THE CONTACT BELIEVED THAT HE COULD HAVE BEEN TOLD WHETHER OR NOT THE SAFETY RECALL APPLIED TO THIS VEHICLE AT THAT TIME. THE RECALL STATED THAT STALLING MAY OCCUR. RECENTLY THE VEHICLE STALLED WHILE HE WAS DRIVING AT 5 - 10 MILES, AND THAT THE VEHICLE HAD ONLY STALLED ONCE. THE WEATHER ON 02/06 WAS CHILLY, BUT CLEAR. THE FAILURE AND CURRENT MILEAGE WERE BOTH 102467. \*AK ON FURTHER CONTACT WITH MANUFACTURER, MANUFACTURER IS NOT WILLING TO HONOR RECALL NOTICE AS POSTED ON THE NHTSA WEB SITE.

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.