



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
2007 DEC 12 PM 2:01
17-SEP-2007

Repository
Reference No.
10203176

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City BROOKLYN State NY Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Evening Telephone Number SAME

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, please print your name and address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 10/1/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G2NE12TXXM [REDACTED]
Make PONTIAC Model GRAND AM Model Year 1999
Date Purchased 01-SEP-98 Dealer's Name and Telephone Number NO LONGER A GM DEALER
Engine: No: Cylinders 4 Fuel Type: Gas
Original Owner Dealer's City State Zip Code
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE FRONT
Vehicle Component Code 034200 SERVICE BRAKES, HYDRAULIC: FOUNDATION COMPONENTS
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 11-SEP-2007 Failure Mileage 20181 Failure Speed 5

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(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 OWNS A 1999 PONTIAC GRAND AM. WHILE APPROACHING A STOP AT APPROXIMATELY 5 MPH, THE BRAKE PEDAL EXTENDED TO THE FLOOR WHEN DEPRESSED. THE CONTACT RELEASED THE PEDAL AND ATTEMPTED TO DEPRESS IT AGAIN, BUT IT WENT ALL THE WAY TO THE FLOOR ONCE MORE. HE WAS FORCED TO APPLY THE EMERGENCY BRAKE IN ORDER TO STOP THE VEHICLE. HE LOOKED BEHIND THE PASSENGER SIDE REAR WHEEL AND NOTICED THAT THE BRAKE FLUID WAS LEAKING FROM THE METAL LINE. THE VEHICLE WAS TOWED TO THE REPAIR SHOP AND THE FAILURE WAS CONFIRMED. THE MECHANIC STATED THAT THE METAL LINE WAS COMPLETELY RUSTED, AND EVERYTHING WAS REPLACED. THE CURRENT AND FAILURE MILEAGES WERE 20,181.
APPROX ONE FOOT SECTION WAS REPLACED.

OVER

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)

REFERRAL FROM GM PONTIAC DIV. TO SERVICE MANAGER AT KRYSTAL PONTIAC/CADILLAC/CHEV. DEALER BROUGHT THE FOLLOWING RESPONSE.
" HAVE SEEN A NUMBER OF PONTIACS WITH ~~SEVERE~~ SEVERE RUSTING OF METAL BRAKE LINES. COST OF REPAIR 1500. DOLLARS "
I DO NOT FEEL SAFE DRIVING MY CAR
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation National Highway Traffic Safety Administration Office of Defects Investigation, NVS-210 400 7th Street, SW Washington, DC 20590



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

Vehicle Owners' 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 EXAMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).