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: 26-FEB-2008 2008 MAR 11 AM 7:24

Repository ☐

Reference No. 10219192

## OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City HARRIMAN | State TN | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

*Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?* ☒ YES ☒ NO
*In the absence of an au[illegible] NHTSA WILL NOT provide your name or address to the vehicle manufacturer.*

Signature of Owner [redacted] Date 2/29/08

## VEHICLE INFORMATION

| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side | Make | Model | Model Year |
|---|---|---|---|
| 1G6KF5791[redacted] | CADILLAC | DEVILLE | 2005 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: | Fuel Type: |
|---|---|---|---|---|---|
| 10-8-05 ~~13-JAN-05~~ | Sexton Automotive Group 865-882-0833 | | | No: Cylinders 8 | Gas |
| Original Owner ☐ | Dealer's City HARRIMAN | State TN | Zip Code 37748 | | |

| Transmission Type | | | Vehicle Component Code |
|---|---|---|---|
| AUTOMATIC | ☒ Antilock Brakes<br>☒ Cruise Control | Powertrain: FRONT WHEEL DRIVE | 103000 POWER TRAIN:AUTOMATIC TRANSMISSION<br>Multiple Failure: 6 |

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

| Incident Date(s) | Failure Mileage | Failure Speed | |
|---|---|---|---|
| 08-SEP-2007 | 8000 | 70 | THE TRANSMISSION WILL DOWN SHIFT TO A LOWER GEAR & IT FEELS LIKE THE BRAKES HAVE BEEN APPLIED. |

## 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: DOTMAL9ABC036) | ☐ 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 | Fire | Number of Persons Injured | Number of Deaths | Reported to Police |
|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | 0 | 0 | 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).**

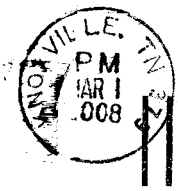
TL*THE CONTACT OWNS A 2005 CADILLAC DEVILLE. WHILE DRIVING 70 MPH, THE TRANSMISSION INTERMITTENTLY FAILS TO SHIFT INTO GEAR. THE BRAKE LIGHT ALSO ILLUMINATES INTERMITTENTLY. THE DEALER TESTED THE COMPUTER THE FIRST TIME. THE SECOND TIME, THEY CLEANED THE TRANSMISSION VALVE BODY AND REPLACED IT THE THIRD TIME. THE FOURTH TIME, THE DEALER REPROGRAMMED THE COMPUTER. THE FIFTH TIME, THE DEALER TEST DROVE THE VEHICLE AND FOUND NO FAILURE. THE SIXTH AND FINAL TIME, THE MANUFACTURER INFORMED THE DEALER NOT TO TAKE ANY ACTION. THE FAILURE MILEAGE WAS 8,000 AND CURRENT MILEAGE WAS 17,000. WHEN DRIVING AT NIGHT THE HEAD LIGHTS WILL BLINK WITHIN THE 1ST 5-10 MIN. THIS OCCARRS ALL THE TIME. THE PROBLEMS ARE All ELECTRICAL RELATED & COULD BE A HAZARD ON THE INTERSTATE. GM REFUSES TO CHANGE THE COMPUTER WHICH I HAVE BEEN TOLD IS THE PROBLEM. I HAVE TALKED TO OTHER TRANSMISSION (over)

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

**Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)**

MECHANICS & THEY STATE THAT THE PROBLEM WILL EXIST UNTIL THE COMPUTER IS CHANGED.

ATTACH ADDITIONAL SHEETS IF NECESSARY



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

U.S. Department of Transportation

**National Highway Traffic Safety Administration**

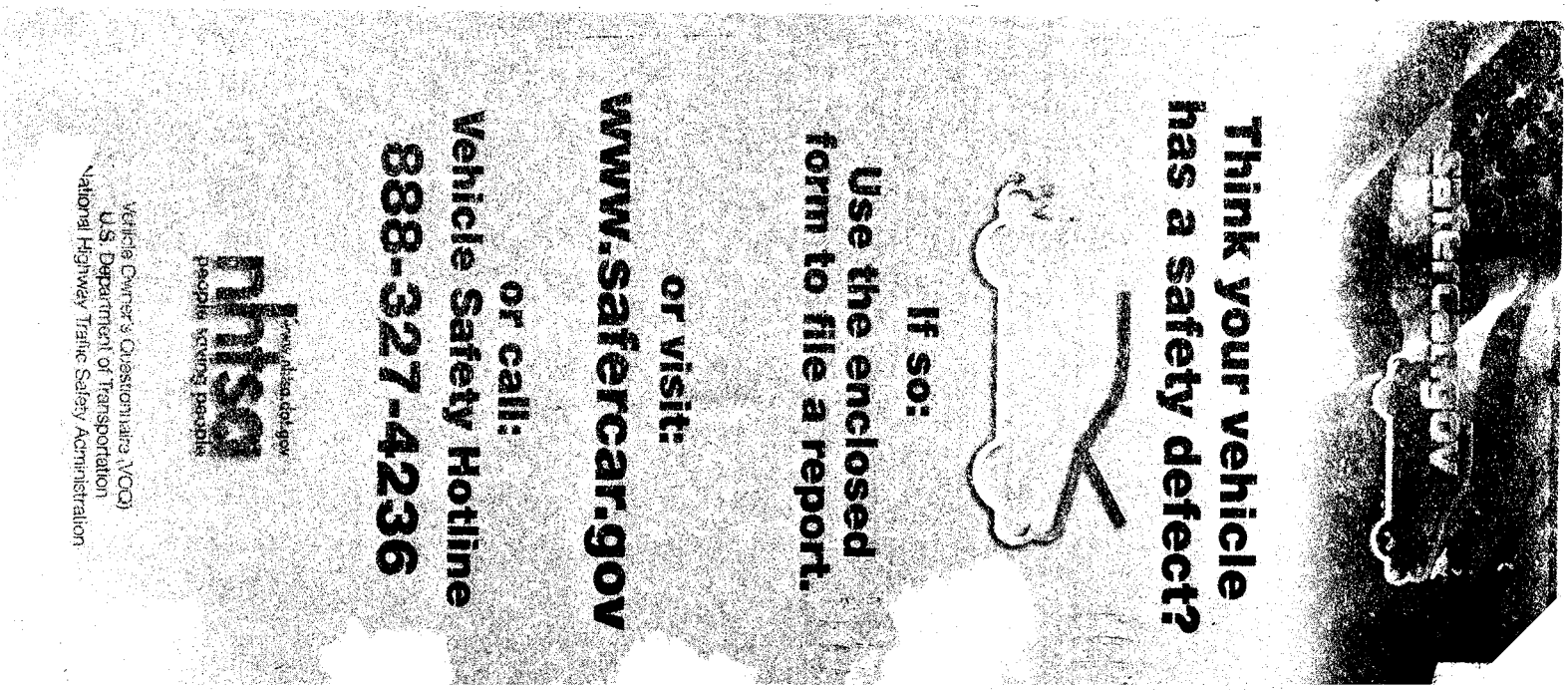
400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

**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



TAC CASE RECORD NUMBER.....[redacted]
REPAIR ORDER NUMBER.....[redacted]
VEHICLE IDENTIFICATION NUMBER...1G6KF5791[redacted]
CALLER'S NAME.....Bill Long
ASSIGNED TO FIRST NAME.....JOE
ASSIGNED TO LAST NAME.....DINEEN
MODEL YEAR.....05
BODY STYLE.....57
KEYWORD QUALIFIER'S BELOW
SHIFT 4-2 4-3

---

ATTENTION OPEN TAC CASE NOTIFICATION

PLEASE DELIVER TO THE DEALERSHIP SERVICE MANAGER IMMEDIATELY

The above TAC Case Record Number, Repair Order Number, and VIN information relates to a call your dealership placed to GM Technical Assistance within the last 5 business days. The case number listed above has been determined to be a "high interest" case and we are requesting that the case be closed with repair information through the TAC Case Closing Form located on the DealerWorld Service Tab. (Please do not attempt to fax your closing back to TAC as it will not be processed.) If you are still completing repairs on this vehicle, please close the case once the repairs are complete. If the case has been closed please disregard this message. Please note it may take up to 3 business days to process your case closing from the time you submitted it.

If you need additional diagnostic assistance with the case call General Motors Technical Assistance at 1-877-446-8227 and speak to a consultant. Please refer to your TAC Case Number above when calling.

If you do not have access to the TAC Case Closing Form on Dealer World please consult your onsite Partner Security Coordinator (PSC) to have the application loaded. Please see DealerWorld Messenger messages VSS20071154, VSG20062829 (archived) and VSS20060695 (archived) in DealerWorld for additional information.

TAC CASE RECORD NUMBER.....[redacted]
REPAIR ORDER NUMBER.....[redacted]
VEHICLE IDENTIFICATION NUMBER...1G6KF57915[redacted]
CALLER'S NAME.....Bill Long
ASSIGNED TO FIRST NAME.....JOE
ASSIGNED TO LAST NAME.....DINEEN
MODEL YEAR.....05
BODY STYLE.....57
KEYWORD QUALIFIER'S BELOW
SHIFT 4-2 4-3

---

To the Service Manager

Our records indicate you have the above listed TAC case open over two weeks
and we would appreciate it if you would close the case noted using the attached form. If you have recently closed the case reflected on this notification, the closing is in process.

PLEASE DO NOT SEND COPIES OF REPAIR ORDERS.

PLEASE USE THIS FORM ONLY.

FAX

To GM TAC @ 1-800-544-1761

Case Number_____ Your Dealer Code (BAC)_____

Labor Operation #_____

In the technicians own words please state the cause and correction that repaired the vehicle.

CAUSE:_____

_____

CORRECTION:_____

_____

_____

General Motors Corporation
Customer and Relationship Services
Customer Assistance Center
PO Box 33170
Detroit, MI 48232-5170

December 26, 2007

State of Tennessee
Office of the Attorney General
Consumer Affairs Division
Attention: Joyce Jarvis Hughey

Customer [redacted]
Reference number: 07-04686
Service request: 71-578128726
Customer Relationship Specialist: Joseph Merrill

Dear Consumer Protection Specialist II Hughey:

Thank you for your recent correspondence regarding [redacted]. We are sorry he is dissatisfied with his 2005 Cadillac DeVille. General Motors' continued success depends upon the satisfaction our customers receive from their vehicles.

We apologize for any inconvenience [redacted] may have experienced.

The inspection o[redacted]s vehicle at Sexton Chevrolet-Cadillac, Inc. revealed it is operating within General Motors specifications. Although we would like to increase [redacted]s satisfaction with his vehicle, we do not feel additional repairs or adjustments are appropriate at this time. If the condition the customer is experiencing should change, we will be happy to review the matter further. This will be General Motors final position in this matter.

If you have further questions, please contact me at 1-866-790-5700 extension 21272 Monday through Friday between 9:00 a.m. and 5:30 p.m., Eastern Time. Please refer to the service request number above and I will be happy to assist you.

Sincerely,

Cadillac Business Resource Center

Customer Number: 253

Invoice No: 46043


SEXTON
AUTOMOTIVE GROUP
S. ROANE ST. P.O. BOX 729
HARRIMAN, TN 37748
Sales: (865) 882-0833 · Service: (865) 882-2416
1-800-688-0833 · Fax: (865) 882-0840
Chevrolet Cadillac Buick GMC Truck Chrysler Dodge Jeep


[redacted]

HARRIMAN, TN [redacted]
Home: [redacted] Bus: Cell: 8653109469
Email: [redacted]

SERVICE ADVISOR: 4 MIKE JUSTICE

| COLOR | YEAR | MAKE/MODEL | VIN | LICENSE | MILEAGE IN / OUT | TAG |
|---|---|---|---|---|---|---|
| SILVER | 05 | CADILLAC DEVILLE | 1G6KF57915[redacted] | | 13070 13070 | |

| DEL. DATE | PROD. DATE | WARR. EXP. | PROMISED | PO NO. | RATE | PAYMENT | INV. DATE |
|---|---|---|---|---|---|---|---|
| I | | | 17:30 29OCT07 | | | CASH | 31OCT07 |

| R.O. OPENED | READY | OPTIONS: STK:1603 ENG:4.6_Liter |
|---|---|---|
| 09:20 29OCT07 | 09:13 31OCT07 | |

| SECTION | OPCODE | TECH | TYPE | | | LIST | NET | TOTAL |
|---|---|---|---|---|---|---|---|---|
| A | ONE TIME IN 3 WEEKS TRANS WOULD NOT UPSHIFT--LIMP IN MODE | | | | | | | |
| | CAUSE: E | | | | | | | |
| | 30 NO CODES STORED DROVE TO MURPHY SC AND BACK TO HARRIMAN UNABLE TO DUPLICATE COMPLAINT. | | | | | | | |
| | | 34 | WGM | 0.00 hrs. | | | 0.00 | 0.00 |
| | | | | 0 | 0 | TPARTS | | |
| | | | | 0 | 0 | TLABOR | | |
| B | GM RENTAL CAR | | | | | | | |
| | CAUSE: E | | | | | | | |
| | 70 SUBLET | | | | | | | |
| | | 34 | WGM | 0.00 hrs. | | | | 0.00 |
| | | | | 0 | 0 | TPARTS | | |
| | | | | 0 | 0 | TLABOR | | |
| | COST, SALE, & COMP TOTALS | | | 0 | 0 | 0 | | |

VIN#: 1G6KF5791[redacted]

SERVICE DEPARTMENT HOURS:
8:00 am - 5:00 pm
MONDAY through FRIDAY

THANK YOU FOR THIS OPPORTUNITY TO SERVE YOU. IT IS OUR AIM TO PERFORM ALL THE REPAIRS REQUESTED ON THIS REPAIR ORDER TO YOUR COMPLETE SATISFACTION. IF OUR SERVICE WAS SATISFACTORY TELL YOUR FRIENDS. IF NOT, PLEASE TELL US IMMEDIATELY.

STATEMENT OF DISCLAIMER

Any warranties on the products sold hereby are those made by the manufacturer. The selling Dealer hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and the Selling Dealer neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this part(s) and/or service.

Buyer shall not be entitled to recover from the Selling Dealer any consequential damages, damages to property, damages for loss of use, loss time, loss of profit or income, or any other incidental damages.

CUSTOMER SIGNATURE

| DESCRIPTION | TOTALS |
|---|---|
| LABOR AMOUNT | 0.00 |
| PARTS AMOUNT | 0.00 |
| GAS, OIL, LUBE | 0.00 |
| SUBLET AMOUNT | 0.00 |
| MISC. CHARGES | 0.00 |
| TOTAL CHARGES | 0.00 |
| LESS INSURANCE | 0.00 |
| SALES TAX | 0.00 |
| PLEASE PAY THIS AMOUNT | 0.00 |

*Warranty Copy*

*Technician Copy*

CUSTOMER #: 253

**WORKORDER**
**44057**

PAGE 1


**SEXTON AUTOMOTIVE GROUP**

S. ROANE ST. P.O. BOX 729
HARRIMAN, TN 37748
Sales: (865) 882-0833 · Service: (865) 882-2416
1-800-688-0833 · Fax: (865) 882-0840
Chevrolet Cadillac Buick GMC Truck Chrysler Dodge Jeep


[redacted]
HARRIMAN, TN [redacted]
HOME: [redacted] BUS: CELL: 8653109469
EMAIL: SERVICE ADVISOR: 24 JUSTICE,MIKE

| COLOR | YEAR | MAKE/MODEL | VIN | LICENSE | MILEAGE IN/ OUT | TAG |
|---|---|---|---|---|---|---|
| SILVER | 05 | CADILLAC DEVILLE | 1G6KF57915[redacted] | | 10975 | |

| DEL DATE | PROD. DATE | WARR. EXP. | PROMISED | PO NO. | RATE | PAYMENT | INV. DATE |
|---|---|---|---|---|---|---|---|
| I | | | 17:30 10SEP07 | | | CASH | |

| R.O. OPENED | READY | OPTIONS: STK:1603 ENG:4.6_Liter |
|---|---|---|
| 10SEP200708:53 | I | |

| LINE | OP CODE | TECH. | TYPE | DESCRIPTIONS/INSTRUCTIONS |
|---|---|---|---|---|
| # A | 30 | | WGM | TRANS WONT SHIFT OUT OF 3RD AT TIMES--JERK WHEN SHIFTS TO 3RD |

#13
F OA

Valve Body Bolts
Sticks
Replace - Valve Body
and. (3P)
K6610
25

Repeat Repair
9

VIN# 1G6KF57915[redacted]

*All ex
otherwi
in the e
service,
related i
The sell
including
nor auth

the dealers, unless
npletion of a repair or
harge will be directly
ie.
expressed or implied
oup, neither assumes
).

PRELIMINARY ESTIMATE $ _____

AUTHORIZED BY X

| | DATE | TIME | BY |
|---|---|---|---|
| REVISED ESTIMATE (1) | | | |
| REVISED ESTIMATE (2) | | | |
| REVISED ESTIMATE (3) | | | |

I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROVAL OF THE ABOVE REVISED ESTIMATES:

X _____
CUSTOMER SIGNATURE

TERMS: STRICTLY CASH OR CREDIT CARD

REPLACED PARTS WILL BE MADE AVAILABLE UNLESS SPECIFIED OTHERWISE ☐ DISCARD

RO # _____
OF _____

RENTAL ☐

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. REPAIR WORK DONE ON THIS ORDER WILL BE BASED IN PART UPON A FLAT RATE MANUAL COMPUTATION.

I agree that I will personally pay or cause to be paid any and all charges for labor and materials used in the repair of this automobile. I further agree to pay all costs, including Court costs and reasonable attorney's fees [redacted] on attorney for collection.

PLEASE READ ABOVE BEFORE SIGNING X _____

Customer Number: 253

Invoice No: 45213


SEXTON
AUTOMOTIVE GROUP
S. ROANE ST. P.O. BOX 729
HARRIMAN, TN 37748
Sales: (865) 882-0833 · Service: (865) 882-2416
1-800-688-0833 · Fax: (865) 882-0840
Chevrolet Cadillac Buick GMC Truck Chrysler Dodge Jeep


[redacted]
HARRIMAN, TN [redacted]
Home: [redacted] B Bus: Cell: 8653109469
Email:

SERVICE ADVISOR: 4 MIKE JUSTICE

| COLOR | YEAR | MAKE/MODEL | VIN | LICENSE | MILEAGE IN / OUT | | TAG |
|---|---|---|---|---|---|---|---|
| SILVER | 05 | CADILLAC DEVILLE | 1G6KF57915[redacted] | | 11652 | 11652 | |

| DEL. DATE | PROD. DATE | WARR. EXP. | PROMISED | PO NO. | RATE | PAYMENT | INV. DATE |
|---|---|---|---|---|---|---|---|
| I | | | 17:30 08OCT07 | | | CASH | 09OCT07 |

| R.O. OPENED | READY | OPTIONS: STK:1603 ENG:4.6_Liter |
|---|---|---|
| 14:20 08OCT07 | 09:56 09OCT07 | |

| SECTION | OPCODE | TECH | TYPE | S/HRS | COST | SALE | COMP | LIST | NET | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|
| A | SES LIGHT ON --TRANS NOT SHIFTING | | | | | | | | | |
| | CAUSE: E | | | | | | | | | |
| | 10 RESET TRANS SHIFT POINTS & ROAD TEST - INFORMATION ONLY | | | | | | | | | |
| | | 34 | WGM | 0.00 | 0.00 | 0 | 0 | | 0.00 | 0.00 |
| | | | | | | 0 | 0 TPARTS | | | |
| | | | | | | 0 | 0 TLABOR | | | |

| ACCOUNT | SALE | COST | CONTROL | ACCOUNT | SALE | COST | CONTROL |
|---|---|---|---|---|---|---|---|
| 46200 | 0 | 0 | | 26300 | 0 | ******* | |

| | COST | SALE | COMP |
|---|---|---|---|
| COST, SALE, & COMP TOTALS | 0 | 0 | 0 |

VIN#: 1G6KF57915[redacted]

SERVICE DEPARTMENT HOURS:
8:00 am - 5:00 pm
MONDAY through FRIDAY

THANK YOU FOR THIS OPPORTUNITY TO SERVE YOU. IT IS OUR AIM TO PERFORM ALL THE REPAIRS REQUESTED ON THIS REPAIR ORDER TO YOUR COMPLETE SATISFACTION. IF OUR SERVICE WAS SATISFACTORY TELL YOUR FRIENDS. IF NOT, PLEASE TELL US IMMEDIATELY.

STATEMENT OF DISCLAIMER

Any warranties on the products sold hereby are those made by the manufacturer. The selling Dealer hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and the Selling Dealer neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this part(s) and/or service.

Buyer shall not be entitled to recover from the Selling Dealer any consequential damages, damages to property, damages for loss of use, loss time, loss of profit or income, or any other incidental damages.

CUSTOMER SIGNATURE

| DESCRIPTION | TOTALS |
|---|---|
| LABOR AMOUNT | 0.00 |
| PARTS AMOUNT | 0.00 |
| GAS, OIL, LUBE | 0.00 |
| SUBLET AMOUNT | 0.00 |
| MISC. CHARGES | 0.00 |
| TOTAL CHARGES | 0.00 |
| LESS INSURANCE | 0.00 |
| SALES TAX | 0.00 |
| PLEASE PAY THIS AMOUNT | 0.00 |

*Accounting Copy*

*Technician Copy*

CUSTOMER #: 253

**WORKORDER**
**41443**

PAGE 1


**SEXTON AUTOMOTIVE GROUP**

S. ROANE ST. P.O. BOX 729
HARRIMAN, TN 37748
Sales: (865) 882-0833 · Service: (865) 882-2416
1-800-688-0833 · Fax: (865) 882-0840
Chevrolet Cadillac Buick GMC Truck Chrysler Dodge Jeep


[redacted]
HARRIMAN, TN [redacted]
HOME: [redacted] BUS:
EMAIL:

CELL: 8653109469

SERVICE ADVISOR: 24 JUSTICE,MIKE

| COLOR | YEAR | MAKE/MODEL | VIN | LICENSE | MILEAGE IN/ OUT | TAG |
|---|---|---|---|---|---|---|
| SILVER | 05 | CADILLAC DEVILLE | 1G6KF57915[redacted] | | 9255 | |

| DEL DATE | PROD. DATE | WARR. EXP. | PROMISED | PO NO. | RATE | PAYMENT | INV. DATE |
|---|---|---|---|---|---|---|---|
| I | | | 17:30 09JUL07 | | | CASH | |

| R.O. OPENED | READY | OPTIONS: STK:1603 ENG:4.6_Liter |
|---|---|---|
| 09JUL200708:34 | I | |

| LINE | OP CODE | TECH. | TYPE | DESCRIPTIONS/INSTRUCTIONS |
|---|---|---|---|---|
| # | A 10 | | WGM | SES LIGHT ON--TRANS WONT SHIFT |

#13 WG Reprogram ECM + Road Test
Code P0751
P0757
J6354
.4

VIN# 1G6KF57915[redacted]

MJ-98 1 DAY Rental
Z7901 42.00

3GKFK16ZX3[redacted]

Rental

**DISCLAIMER OF WARRANTY**

"All expressed warranties, if any, by a manufacturer or supplier are theirs, not the dealers, unless otherwise provided in writing and furnished to the buyer by the dealer.
In the event that you, the customer authorize commencement but do not authorize completion of a repair or service, a charge will be imposed for disassembly, or partially completed work. Such charge will be directly related to the actual amount of labor or parts involved in the inspection, repair or service.
The seller, Sexton Automotive Group, hereby expressly disclaims all warranties, either expressed or implied including merchantability or fitness for a particular purpose, and Sexton Automotive Group, neither assumes nor authorizes any other person to assume for it any liability in connection with the sale.

TERMS: STRICTLY CASH OR CREDIT CARD

REPLACED PARTS WILL BE MADE AVAILABLE UNLESS SPECIFIED OTHERWISE ☐ DISCARD

RO # _____ OF _____

RENTAL ☐

I hereby authorize the repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft or any other cause beyond your control or for any delays caused by unavailability of parts or delays in parts shipments by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. REPAIR WORK DONE ON THIS ORDER WILL BE BASED IN PART UPON A FLAT RATE MANUAL COMPUTATION.

I agree that I will personally pay or cause to be paid duly and all charges for labor and materials used in the repair of this automobile. I further agree to pay all costs, including Court costs and reasonable attorney fees , or collection agency fees, in the event this account is turned over to an attorney for collection.

PLEASE READ ABOVE BEFORE SIGNING X _____
CUSTOMER SIGNATURE



PRELIMINARY ESTIMATE $ _____

AUTHORIZED BY X

| | DATE | TIME | BY |
|---|---|---|---|
| REVISED ESTIMATE (1) | | | |
| REVISED ESTIMATE (2) | | | |
| REVISED ESTIMATE (3) | | | |

I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROVAL OF THE ABOVE REVISED ESTIMATES:

X _____
CUSTOMER SIGNATURE

Customer Number: 253

Invoice No: 42657


SEXTON
AUTOMOTIVE GROUP
S. ROANE ST. P.O. BOX 729
HARRIMAN, TN 37748
Sales: (865) 882-0833 · Service: (865) 882-2416
1-800-688-0933 · Fax: (865) 882-0840
Chevrolet Cadillac Buick GMC Truck Chrysler Dodge Jeep


[redacted]
HARRIMAN, TN [redacted]
Home: [redacted] Bus:
Email:

Cell: 8653109469

SERVICE ADVISOR: 4 MIKE JUSTICE

| COLOR | YEAR | MAKE/MODEL | VIN | LICENSE | MILEAGE IN / OUT | TAG |
|---|---|---|---|---|---|---|
| SILVER | 05 | CADILLAC DEVILLE | 1G6KF5791[redacted] | | 9478 9478 | |

| DEL. DATE | PROD. DATE | WARR. EXP. | PROMISED | PO NO. | RATE | PAYMENT | INV. DATE |
|---|---|---|---|---|---|---|---|
| I | | | 17:30 06AUG07 | | | CASH | 16AUG07 |

| R.O. OPENED | READY | OPTIONS: STK:1603 ENG:4.6_Liter |
|---|---|---|
| 15:53 06AUG07 | 14:34 16AUG07 | |

| SECTION | OPCODE | TECH | TYPE | | | LIST | NET | TOTAL |
|---|---|---|---|---|---|---|---|---|
| A | WHILE DRIVING AND MAINTAINING SPEED TRANS WILL DOWN SHIFT | | | | | | | |
| | CAUSE: E | | | | | | | |
| | K6610 VALVE ASSEMBLY, LOWER CONTROL - R&R OR REPLACE | | | | | | | |
| | | 13 | WGM | 2.90 hrs. | | | 190.88 | 190.88 |
| | | 1 | 24236186 | VALVE | | 20.58 | 16.42 | 16.42 |
| | | 1 | 24207384 | VALVE ASM | | 26.32 | 21.00 | 21.00 |
| | | 8 | 88861003 | FLUID FC: 3P | | 7.07 | 5.64 | 45.12 |
| | | | | 5897 | 8254 | TPARTS | | |
| | COST, SALE, & COMP TOTALS | | | 6090 | 19088 | TLABOR | | |
| | | | | 11987 | 27342 | 0 | | |

VIN#: 1G6KF57915[redacted]

**SERVICE DEPARTMENT HOURS:**
**8:00 am - 5:00 pm**
**MONDAY through FRIDAY**

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Buyer shall not be entitled to recover from the Selling Dealer any consequential damages, damages to property, damages for loss of use, loss time, loss of profit or income, or any other incidental damages.

CUSTOMER SIGNATURE

| DESCRIPTION | TOTALS |
|---|---|
| LABOR AMOUNT | 190.88 |
| PARTS AMOUNT | 82.54 |
| GAS, OIL, LUBE | 0.00 |
| SUBLET AMOUNT | 0.00 |
| MISC. CHARGES | 0.00 |
| TOTAL CHARGES | 273.42 |
| LESS INSURANCE | 0.00 |
| SALES TAX | 0.00 |
| PLEASE PAY THIS AMOUNT | 273.42 |

***Warranty Copy***

# Consumer Complaint

Commerce & Insurance
Division of Consumer Affairs
500 James Robertson Parkway, Fifth Floor
Nashville, TN 37243-0600
(615) 532-4994 Fax

| Received in office: | For official use only: |
|---|---|
| | subject code: _____ |
| | assigned to: _____ |
| | File # : _____ |

## Section I: How Do We Reach You? Your Contact Information

***Please Print Clearly or Type. All fields marked with an asterisk (*) are required. Provide as much information as possible.***

*Name: [redacted]

*Address: [redacted]

*City: HARRIMAN *State: TN *Zip: [redacted]

*(Tennessee Residents only) County: ROANE

Phone: Home: [redacted] Work: (____) _____ E-mail address: _____

Best Contact Time: ANY TIME

## Section II: Who is Your Complaint Against? Business Contact Information

*Business Name: CADILLAC MOTOR CAR DIV. Elet [redacted]

Contact Person: ALISHA HARPER

*Address: P.O. BOX 33169

*City: DETROIT *State: MI *Zip: 48232-5769

Phone: (866) 790-5700 X21427 Fax: (____) _____

E-mail address: _____ Website address: _____

Type of Product or Service: SERVICE ON MY 2005 CADILLAC

## Section III: What Happened? Details of Incident

*Amount involved: $ 0 How did you pay? _____ *Date of transaction: 10/29/07

*Have you contacted the business about this complaint? YES If YES, to whom and when: MIKE JUSTICE 6 TIMES

*What are you asking the business to do? CORRECT THE TRANSMISSION PROBLEMS ON MY 2005 CADILLAC WHICH HAS 13,700 MILES ON IT & IS STILL IN WARRANTY.

*What did the business do? SEXTON CADILLAC SERVICE DEPT. HAS CHECKED THE CAR FIVE DIFFERENT TIMES. SEE BACK FOR MORE INFORMATION. I CONTACTED CADILLAC & THEY SAID THEY WOULD NOT REPLACE THE COMPUTER WITHOUT A FAILURE CODE FROM THE DEALER

List all agencies you have contacted about this complaint: SEXTON AUTOMOTIVE GP. P.O. BOX 729 HARRIMAN, TN. 37748 1-800-688-0833

*Have you or the business filed a lawsuit regarding this complaint? ☐ YES ☒ NO

Was this product or service advertised? L If YES, when and where? GM SERVICE MANUAL
(Please send a copy of the advertisement, if it is available.)

## Section III: What Happened? (Continued)

**efly describe your complaint** and include all important facts. Use chronological order, by dates. Include copies of any contracts, sales ips, canceled checks, correspondence or supporting documents. **DO NOT** mail original documents; these will **NOT** be returned.

THE TRANSMISSION WOULD DOWN SHIFT FROM DRIVE TO 3RD GEAR WHILE ON THE INTERSTATE HIGHWAY. THE SHIFTING OF THE TRANSMISSION WAS ROUGH. THESE ARE THE REPAIRS.

1. THE COMPUTER & TRANSMISSION WAS REPROGRAMMED. THIS HELPED FOR ABOUT 3 WEEKS & THEN THE SAME PROBLEM.
2. THE VALVE BODY OF THE TRANSMISSION WAS CLEANED. THIS HELPED FOR ABOUT 3 WEEKS.
3. THE VALVE BODY OF THE TRANSMISSION WAS REPLACED. THIS HELPED FOR A SHORT WHILE. THIS HAPPENED 9-10-07
4. THE COMPUTER & TRANSMISSION WAS REPROGRAMMED. THIS HELPED FOR A SHORT TIME.
5. 10-29-07. THE DEALER TOOK THE CAR ON A TRIP TO N.C. & STATED THE TRANSMISSION WAS FINE. I PICKED UP THE CAR & THE TRANSMISSION FAILED ON ME ON THE WAY HOME. THIS IS AN INTERMITTENT PROBLEM & CADILLAC WILL NOT AUTHORIZE THE COMPUTER TO BE CHANGED. THE DEALER HAS BEEN VERY COOPERATIVE WITH ME.

## Section IV: Automobile Complaints
### Required Information for Automobile Complaints Only

*Year: 2007 *Make: CADILLAC *Model: DeVille

*Vin Number: 1G6KF577915[redacted] Mileage 13,700

## Section V: Final Step

**If you hire an attorney and/or file a private lawsuit, you have a limited time to sue under the Consumer Protection Act. You have one (1) year from the time you found out about the deceptive act or practice, and no more than five (5) years from the time the deceptive act or practice occurred. Consult a private attorney regarding your legal rights.**

By my signature below, I hereby attest to the accuracy and truthfulness of the content, I authorize the Tennessee Division of Consumer Affairs to send a copy of this complaint to the business and I understand this complaint may be used in legal proceedings brought under the Tennessee Consumer Protection Act.

[redacted] 11-5-07

*Signature *Date

All complaints submitted to the Tennessee Division of Consumer Affairs are subject to the Public Records Act, T.C.A. Title 10, Chapter 7.

## OPTIONAL - We would appreciate having the appropriate boxes checked.

Age: ☐ 18-29 ☐ 30-39 ☐ 40-49 ☐ 50-59 ☒ 60 or older

Is your home telephone number registered on the Tennessee Do Not Call List? ☒ Yes ☐ No

Is your home telephone number registered on the National Do Not Call List? ☒ Yes ☐ No

Have you previously filed any complaint(s) with this Division in the last 2 years? ☐ Yes ☒ No

If yes, please state against whom _____

# Consumer Complaint

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