



U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

2-888-DASH-2-DOT

(1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

10-JUN-2008

Repository

Reference No.

10230502

OWNER INFORMATION (Type or Print)

Name

Address

City

PECULIAR

State

MO

Zip Code

Daytime Telephone Number

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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date 6/1/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1G6KY549X

Make

CADILLAC

Model

SEVILLE

Model Year

1999

Date Purchased

11-16-06

Dealer's Name and Telephone Number

Southeast Auto Brokers

Engine:

No: Cylinders

Fuel Type:

GAS

Original Owner

Dealer's City

Fort Lauderdale

State

FL

Zip Code

33304

Transmission Type

Auto

Antilock Brakes

Cruise Control

Powertrain

Front wheel Drive

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

03-JUN-2008

Failure Mileage

62540

Failure Speed

0

Fuel Rail

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 CADILLAC SEVILLE. THE CONTACT SMELLS GASOLINE WHENEVER THE VEHICLE IS STARTED. HE DISCOVERED THAT A FUEL RAIL WAS LEAKING ON THE NUMBER ONE CYLINDER. THE DEALER STATED THAT THERE WERE NO OPEN RECALLS. THE CURRENT MILEAGE WAS 62,640 AND FAILURE MILEAGE WAS 62,540.

Fuel Rail Cracked just above cyl. #1

CADILLAC HAS RECALL ON ALL PRIOR YEARS EXCEPT 99

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.