



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

01-JUL-2008

Reference No.  
10232944

**OWNER INFORMATION (Type or Print)**

Name

Daytime Telephone Number

E-mail Address

Address

City LITCHFIELD

State MN

Zip Code

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  
In the absence of an authorized signature, you may check the appropriate box.  
Signature of Owner \_\_\_\_\_ Date 7/14/08  YES  NO  
or address to the vehicle manufacturer.

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
1G3WS52HXYF

Make  
OLDSMOBILE

Model  
INTRIGUE

Model Year  
2000

Date Purchased  
9-26-05

Dealer's Name and Telephone Number  
A.M. Maus + son 320-398-3210

Engine:  
No: Cylinders

Fuel Type:

Original Owner

Dealer's City  
Kimball

State MN Zip Code 55353

Transmission Type

Antilock Brakes  
 Cruise Control

Powertrain

Vehicle Component Code  
030000 SERVICE BRAKES, HYDRAULIC

Multiple Failure: Anti-LOCK BRAKES + trac. control

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

Incident Date(s)  
28-JUN-2008

Failure Mileage  
73800

Failure Speed

**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 2000 OLDSMOBILE INTRIGUE. WHILE BACKING OUT OF THE DRIVEWAY, SEVERAL LIGHTS ILLUMINATED ON THE INSTRUMENT PANEL, INCLUDING THE ANTILOCK BRAKE AND TRACTION CONTROL LIGHTS. CURRENTLY, THE LIGHTS REMAIN ILLUMINATED. THE CONTACT TOOK THE VEHICLE TO AN AUTHORIZED DEALER AND THEY STATED THAT THE HYDRAULIC UNIT FAILED. THE CONTACT RESEARCHED RECALLS ON HER VEHICLE AND DISCOVERED THAT SHE WAS EXPERIENCING THE SAME FAILURES DESCRIBED IN NHTSA CAMPAIGN ID NUMBER 00V114000 (SERVICE BRAKES, HYDRAULIC: FOUNDATION COMPONENTS). THE DEALER STATED THAT HER VIN WAS EXCLUDED FROM THE RECALL AND SHE WOULD BE RESPONSIBLE FOR THE REPAIR COSTS. THE VEHICLE HAS NOT BEEN REPAIRED. THE SPEED WAS UNKNOWN. THE FAILURE MILEAGE WAS 73,800 AND CURRENT MILEAGE WAS 73,907.

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.