



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

14-JUL-2008

Repository ☐

Reference No.  
10234197

OWNER INFORMATION (Type or Print)

Name

Address

City

LAS VEGAS

State

NV

Zip Code

Daytime Telephone Number

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 07/19/08

VEHICLE INFORMATION

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

3GYFK66N56G

Make

CADILLAC

Model

ESCALADE ESV

Model Year

2006

Date Purchased

17 JUN 06

Dealer's Name and Telephone Number

ENCLOSED

Engine:

No: Cylinders 8

Fuel Type:

Original Owner

☒

Dealer's City

LAS VEGAS

State

NV

Zip Code

Transmission Type

AUTO

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure:

YES

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)  
24-JUN-2008

Failure Mileage  
11000

Failure Speed  
30

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 2006 CADILLAC ESCALADE ESV. WHILE DRIVING 30 MPH UP A VERY STEEP MOUNTAIN WITH VERY STEEP SWITCHBACKS, THE VEHICLE COMPLETELY SHUT OFF. THE POWER STEERING AND POWER BRAKES STOPPED OPERATING AS WELL. THE WARNING LIGHTS ON THE INSTRUMENT PANEL ILLUMINATED. FIVE TO TEN MINUTES LATER, THE CONTACT WAS ABLE TO RESTART THE VEHICLE AFTER THE COMPUTER SEEMED TO RESET. ON JULY 8, 2008, WHILE DRIVING DOWN A 6,000 FOOT MOUNTAIN, THE VEHICLE SHUT OFF AGAIN AND EXPERIENCED THE SAME FAILURES. HE WAS ABLE TO STOP THE VEHICLE WITH THE EMERGENCY BRAKE. THE CONTACT NOTICED THAT THE FAILURE OCCURRED AT ALL ALTITUDES, THE FIRST BEING APPROXIMATELY 5,000 FEET. THE VEHICLE WAS TAKEN TO THE DEALER, BUT THE CAUSE OF THE FAILURE HAS NOT YET BEEN DETERMINED. THE CURRENT MILEAGE WAS 12,034 AND FAILURE MILEAGE WAS APPROXIMATELY 11,000.

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.

FROM



LAS VEGAS, NEV.

HOM PH  
CELL PH  
FAX  
EMAIL

PURCHASE DATE 17 JUN 2006

TO: CADILLAC WEST SAHARA LV NV. 89146  
SERV. MGR FRED ROSTA  
REF. 2006 ESCALADE ESV 12,034 MILES  
VIN 3GYFK6GN56G

ENGINE STALLS AROUND 5000 FT  
ELEVATION. THE OCCURRED  
TWO TIMES ON RECENT TRIPS  
TO UTAH AND CALIF.

THIS DEFECT COULD CAUSE A  
CRASH WHICH WOULD CERTAINLY  
RESULT IN INJURY OR DEATH,  
ESPECIALLY ON STEEP UPHILL  
AND DOWNHILL GRADES WITH  
SWITCH BACKS

PLEASE ENSURE THAT THIS  
INFORMATION IS ENTERED  
INTO MY VEHICLE RECORDS.  
I WILL ALSO REPORTS THIS  
SERIOUS DEFECT TO THE NHTSA

THANK YOU

COPT TO: NHTSA

14 JULY 2008

CUSTOMER #: 521817

350838

## CADILLAC OF LAS VEGAS WEST

\*INVOICE\*

SALES • LEASING • SERVICE • PARTS

5185 W. SAHARA

LAS VEGAS, NV 89146-3403

SERVICE (702) 873-8888

PARTS (702) 222-1367

DEALER CODE NO. 36220



LAS VEGAS, NV

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HOME: CONT:N/A

BUS: CELL:

SERVICE ADVISOR: 3493 CRAIG VERHEYEN

| COLOR       | YEAR      | MAKE/MODEL           | VIN                         | LICENSE | MILEAGE IN/ OUT | TAG     |          |
|-------------|-----------|----------------------|-----------------------------|---------|-----------------|---------|----------|
|             | 06        | CADILLAC ESCALADE ES | 3GYFK66N560                 |         | 12146/12146     |         |          |
| DEL DATE    | PROD DATE | WARR EXP             | PROMISED                    | PO NO   | RATE            | PAYMENT | INV DATE |
| 17JUN06 DE  |           | 17JUN2010            | 17:00                       | 14JUL08 | 99.22           | CPS     | 15JUL08  |
| R.O. OPENED |           | READY                | OPTIONS: ENG:4.6 Liter DOHC |         |                 |         |          |

08:43 14JUL08 17:01 15JUL08

| LINE | OPCODE | TECH | TYPE | HOURS | LIST | NET | TOTAL |
|------|--------|------|------|-------|------|-----|-------|
| A    |        |      |      |       |      |     |       |

A SERVICE ENGINE SOON LIGH IS COMMING ON AND TRUCK IS STALLING AT HIGH  
ALTUTIDE ABOVE 5000 FEET

CAUSE: F

J5645 UNSTICK AND CLEAN CENTRAL SEQUENTIAL FUEL

INJECTION VALVES

55504 WT

1 88861802 CLEANER

(N/C)

1 88861011 CLEANER

(N/C)

FC: 93

(N/C)

PART#: 88861802

COUNT: 2

CLAIM TYPE:

AUTH CODE:

MH

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE A: 0.00

12146 SES MIL AND IN STALL #? VISUAL/PHYSICAL, OBD2, PCM, TECH2,  
DTC 300 AND MISFIRE, IGNITION/INJECTION TESTS. SLIGHTLY RESTRICTED RH  
INJECTION AS PER AFTTS. CLEAR CODE. PERFORM 03-06-04-030F INJECTION  
FLUSH AND FUEL ADDITIVE. PLEASE BE SURE TO USE TOP TIER FUEL. \*J5645 8  
Cylinder Engine 0.9 hr Add: Diagnostic Time 0.3 hr. 55504

\*\*\*\*\*

B REAR THIRD ROW SEAT WILL NOT LOCK FORWARD

NC NO CHARGE

7014 CC

PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE B: 0.00

12146 SECOND ROW SEATS NOT FORWARD ENOUGH AND THIRD ROW SEAT NOT  
LOCKING MOVED SECOND ROW SEATS FORWARD AND LOCKED THIRD ROW SEAT #7014

\*\*\*\*\*

C SEALS UNDER BOTH ROOF RACK ARE LOOSE

PO PART ON ORDER



Thank you for this opportunity to serve you. It is our aim to perform all the repairs requested to your complete satisfaction. If you have any questions, please notify your Service Advisor immediately.

All parts are new unless otherwise indicated.

\*Supplies - A token charge is included for supplies used on your vehicle. Applicable supply items are: Nuts, Bolts, Washers, Tape, Pins, Aerospray, Solvent, Carburetor Cleaner, Solder, Battery Cleaner, Wire, Window Sealer, Lubricants, Hazardous Waste Disposal, etc.

| ORIGINAL ESTIMATE | AUTHORIZED REVISED ESTIMATE | DESCRIPTION            | TOTALS |
|-------------------|-----------------------------|------------------------|--------|
| \$                | \$                          | LABOR AMOUNT           |        |
|                   |                             | PARTS AMOUNT           |        |
|                   |                             | GAS, OIL, LUBE         |        |
|                   |                             | SUBLET AMOUNT          |        |
|                   |                             | MISC. CHARGES          |        |
|                   |                             | TOTAL CHARGES          |        |
|                   |                             | LESS INS./ADJ./DED.    |        |
|                   |                             | SALES TAX              |        |
|                   |                             | PLEASE PAY THIS AMOUNT |        |
|                   |                             | CUSTOMER SIGNATURE     |        |

CUSTOMER COPY