



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 <input type="checkbox"/>
22-JUL-2008	Reference No. 10235298

**OWNER INFORMATION (Type or Print)**

Name	Daytime Telephone Number	E-mail Address
Address	Evening Telephone Number	
City GREENSBORO	State NC	Zip Code

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 \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1G6KE57Y51U	Make CADILLAC	Model DEVILLE	Model Year 2001
Date Purchased 10/4/2000	Dealer's Name and Telephone Number MASSEY CADILLAC 407-438-3838	Engine: V8 No: Cylinders 4, 6L 32 valve 275 HP V8	Fuel Type: Reg.
Original Owner <input checked="" type="checkbox"/>	Dealer's City Orlando, FL	State FL	Zip Code 32809
Transmission Type Automatic 32 valve 4 speed	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain 4.6 L V8 DOHC Northstar Engine	Vehicle Component Code 130000 VISIBILITY
Multiple Failure:			

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

Incident Date(s) 19-JUL-2008	Failure Mileage 36450	Failure Speed 0	LF window regulator replaced part no. 800 017501304 \$496.94
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**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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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**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 2001 CADILLAC DEVILLE. AFTER THE CONTACT LOWERED THE DRIVER SIDE WINDOW, IT WOULD NOT GO BACK UP. SHE COULD HEAR THE WINDOW MOTOR ATTEMPTING TO TAKE THE WINDOW BACK UP, BUT IT FAILED. THE DEALER STATED THAT THE WINDOW REGULATOR CABLE FAILED. THE REPAIR WOULD COST \$650. THE MANUFACTURER HAS NOT BEEN NOTIFIED. THE CURRENT AND FAILURE MILEAGES WERE APPROXIMATELY 36,450.

Bill Black Cadillac, Greensboro, NC 27405 repaired  
336-275-9641

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.