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

2008 SEP 25 AM 10:18

**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 ☐ |
|---|---|
| 26-AUG-2008 | Reference No. 10239786 |

## OWNER INFORMATION (Type or Print)

| Name | | Daytime Telephone Number | E-mail Address |
|---|---|---|---|
| Address | | Evening Telephone Number | |
| City: FLORISSANT | State: MO | 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 auth... NHTSA WILL NOT ... or address to the vehicle manufacturer.*
Signature of Owner _____ Date 9/5/08

## VEHICLE INFORMATION

| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side | Make | Model | Model Year |
|---|---|---|---|
| 1G4HP57258U116457 (1G4HP57258U) | BUICK | LUCERNE | 2008 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: No: Cylinders | Fuel Type: |
|---|---|---|---|---|---|
| 6-30-08 | BEHLMANN Buick | | | 6 | GAS |
| Original Owner ☑ | Dealer's City: HAZEL WOOD | State: MO | Zip Code: 63042 | | |

| Transmission Type | | Powertrain | Vehicle Component Code |
|---|---|---|---|
| Auto | ☑ Antilock Brakes ☑ Cruise Control | 3800 | 110000 ELECTRICAL SYSTEM |
| | | | Multiple Failure: |

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

| Incident Date(s) | Failure Mileage | Failure Speed |
|---|---|---|
| 03-JUL-2008 | 90 | 0 |

## 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 2008 BUICK LUCERNE. THE CONTACT NOTICED THAT THE LIGHTING ON THE INSTRUMENT CONTROL PANEL HAD A CONSTANT LOW INTENSITY, RESULTING IN POOR ILLUMINATION. AS A RESULT, HE WAS UNABLE TO SEE THE WARNING LIGHTS AND OTHER IMPORTANT INFORMATION ON THE INSTRUMENT CONTROL PANEL. HE TOOK THE VEHICLE TO THE DEALER AND THEY STATED THAT IT WAS A CHARACTERISTIC OF THE VEHICLE. THE FAILURE MILEAGE WAS 90 AND CURRENT MILEAGE WAS 1,300.

THE MESSAGE CENTER DOSE NOT INTENSIFY WHILE DAYLIGHT OPERATION - THE SAFTY ISSUES ARE THE OIL LIFE WARNING, TIRE PRESSURE DISTANCE ON FUEL, ODOMETER READING, AIR BAG MALFUNCTION AND EVERYTHING THAT READS ON THE MESSAGE CENTER.

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