



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
16-OCT-2008

Repository
Reference No.
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OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City ALGONQUIN State IL Zip Code [Redacted]

Daytime Telephone Number [Redacted] E-mail Address [Redacted]
Evening Telephone Number [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an authorized signature, please print your name or address to the vehicle manufacturer. YES NO
Signature of Owner [Redacted] Date 10/26/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1G2WP12K6X[Redacted]
Make PONTIAC Model GRAND PRIX Model Year 1999
Date Purchased 1999 Dealer's Name and Telephone Number Crystal Lake Pontiac 815 477 8600
Original Owner Dealer's City " " State IL Zip Code 60014 Engine: No: Cylinders 6 Fuel Type: Reg
Transmission Type Auto Antilock Brakes Cruise Control Powertrain 3.8L Multiple Failure: Incident Date(s) 11-OCT-2008

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC
Failure Mileage ~~56000~~ 51000 Failure Speed 5

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [Redacted] Tire Model (Name or Number) [Redacted] Tire Size (Example P215/65R15) [Redacted]
DOT No. (Example: DOTM9ABC036) Original Equipment Prior Repair Failure Location: [Redacted]
Tire Component Code [Redacted] Tire Failure Type [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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 PONTIAC GRAND PRIX. WHILE BACKING OUT OF THE DRIVEWAY AT APPROXIMATELY 5 MPH, THE VEHICLE FAILED TO STOP WHEN THE BRAKE PEDAL WAS DEPRESSED. THE VEHICLE SLOWED DOWN; HOWEVER, THE CONTACT HAD TO APPLY THE EMERGENCY BRAKE IN ORDER TO STOP THE VEHICLE. THE VEHICLE WAS TOWED TO A MECHANIC, WHO STATED THAT THE BRAKE LINE WAS RUSTED. THE CURRENT AND FAILURE MILEAGES WERE 56,000.

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.