



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

12 JAN-2009

Repository ☐

Reference No.

10254767

OWNER INFORMATION (Type or Print)

Name

Address

City

LAKEWOOD

State

CO

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 ____/____/____

VEHICLE INFORMATION

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

2G4WF5210W

Make

BUICK

Model

REGAL

Model Year

1998

Date Purchased

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☒ Antilock Brakes

Powertrain

Multiple Failure

Incident Date(s)

01-DEC-2008

AUTO

☒ Cruise Control

FWD

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 010000 STEERING

Failure Mileage

62000

Failure Speed

15

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 1998 BUICK REGAL. WHILE DRIVING APPROXIMATELY 15 MPH ON NORMAL ROAD CONDITIONS, THE POWER STEERING FAILED WHEN PROCEEDING TO MAKE A TURN. THE CONTACT EXERTED MORE EFFORT TO TURN THE STEERING WHEEL. THE FAILURE OCCURRED INTERMITTENTLY. THERE WERE NO WARNING INDICATORS ILLUMINATED ON THE INSTRUMENT PANEL. THE AUTHORIZED DEALER WAS NOTIFIED. THROUGH RESEARCH, THE TECHNICIAN DISCOVERED NHTSA CAMPAIGN ID NUMBER 03V527000 (STEERING, RACK AND PINION). THE CONTACT EXPERIENCED FAILURES IDENTICAL TO THE ONES MENTIONED IN THE RECALL. THE FAILURE AND CURRENT MILEAGES WERE 62,000.

DEALER CONFIRMED DEFECT IS IDENTICAL TO THE RECALL, HOWEVER, BUICK REFUSED TO HONOR IT BECAUSE THAT VIN#, THEY CLAIM, WAS NOT PART OF THE RECALL.

THERE ARE 61 IDENTICAL CLAIMS ON YOUR WEBSITE THAT WERE ALSO NOT COVERED. THE

RACK + PINION ASSEMBLY WAS REPLACED + PART RECTIFIED THE PROBLEM. THIS VEHICLE ALSO →

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

HAD A FAILURE IN THE ABS MOTOR PACK THAT PREVENTED THE PLEURAL BRAKES FROM WORKING (3 CHANNEL SYSTEM). NUMEROUS COMPLAINT FROM OTHER OWNERS ALSO. THIS VEHICLE ALSO HAS A DEFECT IN THE IGNITION SWITCH WHICH CAUSES THE VEHICLE TO STALL WHEN USING THE LEFT TURN SIGNAL! NUMEROUS COMPLAINTS FROM OTHER OWNERS WERE NOTED ON YOUR SITE & OTHERS FOR THESE IDENTICAL PROBLEMS.

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U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

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**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

