



DOT Auto Safety Hotline

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

Vehicle Owner's Questionnaire

To Report Vehicle Safety Defects

2009 MAY 14 PM 4:24
1-888-DASH-2-DOT
(1-888-327-4236)

INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

24-MAR-2009

Reference No.
10262911

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

Evening Telephone Number

City

BUTLER

State

PA

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

1GNEK13K5SJ

Make

CHEVROLET

Model

TAHOE

Model Year

1995

Date Purchased

10-25-1999

Dealer's Name and Telephone Number

Dennis J. Baglier Buick INC

724-283-7400

Engine:

No: Cylinders

8

Fuel Type:

GAS

Original Owner

Dealer's City

Butler PA

State

PA

Zip Code

16001

Transmission Type

4L60E

Antilock Brakes

Powertrain

Cruise Control

Multiple Failure:

Incident Date(s)

10-JUL-2000

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Failure Mileage

21838

Failure Speed

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: 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 1995 CHEVROLET TAHOE. THE CONTACT STATED THAT THE TRANSMISSION FAILED ON THE VEHICLE. THE TRANSMISSION WAS REPLACED WITH A REBUILT TRANSMISSION. WITHIN A YEAR AND A HALF, THE TRANSMISSION FAILED AGAIN. THE MECHANIC STATED THAT IT SEEMED AS IF THE TRANSMISSION FLUID WAS NOT BEING COOLED FOR SOME REASON. THE CONTACT STATED THAT JUST BEFORE THE TRANSMISSION FAILED, HE COULD SMELL BURNING TRANSMISSION FLUID EACH TIME. THE TRANSMISSION WAS REPLACED AGAIN WITH ANOTHER REBUILT TRANSMISSION. WITHIN NINE YEARS, THE TRANSMISSION WAS REPLACED A TOTAL OF FIVE TIMES EVERY YEAR AND A HALF. THE CONTACT HAD THE TRANSMISSION REBUILT AT THE COST OF \$1,700. THERE WERE NO RECALLS FOR THE FAILURE. THE FAILURE AND CURRENT MILEAGES WERE LESS THAN 21,838.

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)

mileage at purchase 46218, NO RECEIPTS FROM FIRST TWO TRANSMISSIONS. COPIES OF LAST THREE
DONT HAVE RECEIPTS FROM TOWING AND LOANER VEHICLE

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

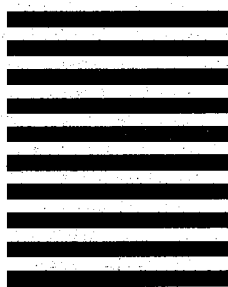


**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE



**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



AAA TRANSMISSIONS

608 Freeport Road, Butler, PA 16002

(724) 352-3329 (724) 283-5717

INVOICE

To  Date 6-27-07

Phone  License Plate No _____

YEAR/MAKE/MODEL <u>95 TAHOE</u>	MILEAGE <u>182292</u>	WRITTEN BY <u>Bob M.</u>
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Description	Price
<u>R&R rebuilt 4L60E automatic transmission w/DEF torque parts & labor</u>	<u>1500.00</u>
<u>JDMC</u>	

Terms: Net - 30 days
 All invoices past due or over 30 days are subject to a service charge of 1 1/2% per month or 18% per annum.
PLEASE PAY FROM THIS INVOICE
 NOT AFFILIATED WITH AMERICAN AUTOMOBILE ASSOCIATION

Sub Total 1500.00
 Tax 90.00
TOTAL 1590.00

I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicle placed with them for storage, sale, repair or while road testing.

AUTHORIZED BY _____

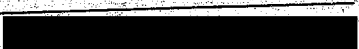
AAA TRANSMISSIONS

608 Freeport Road, Butler, PA 16002

(724) 352-3329 (724) 283-5717

INVOICE

To  Date 6-18-04

Phone H -  License Plate No _____

YEAR/MAKE/MODEL <u>95 TAHOE</u>	MILEAGE <u>124662</u>	WRITTEN BY <u>Bob M.</u>
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Description	Price
<u>R&R rebuilt 4L60E automatic transmission parts & labor</u>	<u>1300.00</u>
<u>JDMC</u>	

Terms: Net - 30 days
 All invoices past due or over 30 days are subject to a service charge of 1 1/2% per month or 18% per annum.
PLEASE PAY FROM THIS INVOICE
 NOT AFFILIATED WITH AMERICAN AUTOMOBILE ASSOCIATION

Sub Total 1300.00
 Tax 78.00
TOTAL 1378.00

I hereby authorize the above repair work to be done along with necessary materials. You and your employees may operate above vehicle for purposes of testing, inspection or delivery at my risk. An express mechanic's lien is acknowledged on above vehicle to secure the amount of repairs thereto. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicle placed with them for storage, sale, repair or while road testing.

AUTHORIZED BY _____

AAA TRANSMISSIONS

608 Freeport Road, Butler, PA 16002
(724) 352-3329 (724) 283-5717

INVOICE

To [REDACTED]

Date 2-17-09

Phone [REDACTED]

License Plate No _____

YEAR/MAKE/MODEL <u>95 TAHOE</u>	MILEAGE <u>217317</u>	WRITTEN BY <u>Bob M</u>
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Description	Price
R&R rebuilt 4L60E automatic transmission parts & labor	1500.00
fees discont	- 400.00
Replace u-joint parts & labor	55.00
<i>MC</i>	

Terms: Net - 30 days
All invoices past due or over 30 days are subject to a service charge of 1½% per month or 18% per annum.

PLEASE PAY FROM THIS INVOICE
NOT AFFILIATED WITH AMERICAN AUTOMOBILE ASSOCIATION

Sub Total 1155.00
Tax 69.30
TOTAL 1224.30

I authorize the above repair work to be done along with necessary materials. You and your employees may operate on the above vehicle for purposes of testing. Inspection or delivery at my risk. An express mechanic's lien is acknowledged on the above vehicle to secure the amount of repairs thereto. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicle placed with them for storage, sale, repair or while road testing.

AUTHORIZED BY _____

CUSTOMER'S NAME

D2470

STOCK NO.

ODOMETER DISCLOSURE STATEMENT

Federal law (and State law, if applicable) requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I, **DENNIS J BAGLIER BUICK-GMC, INC.** (transferor's name, Print)

state that the odometer now reads **46218** (no tenths) miles and to the best of my knowledge that it reflects the actual mileage of the vehicle described below, unless one of the following statements is checked.

- (1) I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.
- (2) I hereby certify that the odometer reading is NOT the actual mileage.

WARNING - ODOMETER DISCREPANCY.

MAKE CHEV	MODEL TAN	BODY TYPE SW
VEHICLE IDENTIFICATION NUMBER 1GNEX13K5SJ	YEAR 95	

X *Dennis J. Baglier*
TRANSFEROR'S SIGNATURE

DENNIS J BAGLIER BUICK-GMC, INC.
PRINTED NAME

248 PITTSBURGH ROAD
TRANSFEROR'S ADDRESS (STREET)

BUTLER, PA 16001
CITY STATE ZIP CODE

25 AUG 1999
DATE OF STATEMENT

X [Redacted Signature]
TRANSFEREE'S SIGNATURE

[Redacted Name]
PRINTED NAME

[Redacted Name]
TRANSFEREE'S NAME

[Redacted Address]
TRANSFEREE'S ADDRESS (STREET)

BUTLER PA [Redacted]
CITY STATE ZIP CODE

MV-4ST (8/98)

				TAX/FEES		1ST ASSIGNMENT	2nd ASSIGNMENT	
A. VEHICLE PURCHASED	PA TITLE NUMBER (AS SHOWN ON ATTACHED TITLE)		MAKE OF VEHICLE CHEV	MODEL YEAR 95	PURCHASE PRICE (See note on reverse)	20400.00		
	VEHICLE IDENTIFICATION NUMBER 1GNEK13K5S1		CONDITION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR		LESS TRADE-IN	1000.00		
B. SELLER	LAST NAME (OR FULL BUSINESS NAME) DENNIS BAELTER BUICK INC		FIRST NAME	MIDDLE INITIAL	TAXABLE AMOUNT	19400.00		
	CO-SELLER				1. Sales Tax Due x 6% (.06) or x 7% (.07) (See note on reverse)	1164.00		
1ST ASSIGNMENT	C. 1ST PURCHASER	LAST NAME (OR FULL BUSINESS NAME)		FIRST NAME	MIDDLE INITIAL	1A Exemption Reason Code (must be a number from 1 to 3 or 0)		
		CO-PURCHASER		DATE ACQUIRED/PURCHASED 08/25/99		1B First Assignment		
		STREET		STATE		COUNTY CODE	1B Second Assignment	
		BUTLER		PA		10	2. Title Fee 22.50	
				3. Lien Fee 5.00				
2ND ASSIGNMENT	D. 2ND PURCHASER	LAST NAME (OR FULL BUSINESS NAME)		FIRST NAME	MIDDLE INITIAL	4. Registration or Processing Fee		
		CO-PURCHASER		DATE ACQUIRED/PURCHASED		5. Duplicate Reg. Fee No. of Cards		
		STREET		STATE		COUNTY CODE	6. Transfer Fee 6.00	
							7. Increase Fee	
				8. Replacement Fee				
E. VEHICLE TRADED	MAKE OF VEHICLE CHEV		VEHICLE IDENTIFICATION NUMBER 1GACT18B3F0		TOTAL PAID (Add 1 thru 8)			1197.50
	MODEL YEAR 85	BODY TYPE (CP, TK, ETC.) SW	CONDITION <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR		14. GRAND TOTAL (Add 9 & 10)			1197.50
APPLICATION FOR REGISTRATION	ORIGINAL PLATE <input checked="" type="checkbox"/> Check One <input type="checkbox"/>		TRANSFER OF PREVIOUSLY ISSUED PLATE		9. Send One Check in this Amount			1197.50
	<input type="checkbox"/> PLATE TO BE ISSUED BY BUREAU (PROOF OF INSURANCE MUST BE ATTACHED)		TRANSFER & RENEWAL OF PLATE					
	<input type="checkbox"/> EXCHANGE PLATE TO BE ISSUED BY BUREAU		TRANSFER & REPLACEMENT OF PLATE					
	<input type="checkbox"/> TEMPORARY PLATE ISSUED BY FULL AGENT		TRANSFER OF PLATE & REPLACEMENT OF STICKER					
	PLATE NO. 		REASON FOR REPLACEMENT		10. Send One Check in this Amount			1197.50
	EXPIRES 12 Year 99		<input type="checkbox"/> LOST <input type="checkbox"/> DEFACED <input type="checkbox"/> STOLEN					
TEMP. PLATE NO. 		SIGNATURE OF APPLICANT		RELATIONSHIP TO APPLICANT				
VEHICLE PURCHASED BY 		REG. FEES (SEE REVERSE SIDE)		REQ. REG. GROSS COMB. WT. (IF APPLICABLE)				
INSURANCE COMPANY NAME PROGRESSIVE		DATE 08 03 99		DATE 05 99				
ISSUING AGENT INFORMATION		AGENT NAME BAELTER BUICK INC		AGENT NO. 85-5350E				
				TELEPHONE NO. 724 283-7400				
G. CERTIFICATION	I/WE CERTIFY THAT I/WE HAVE EXAMINED AND SIGNED THIS FORM AFTER ITS COMPLETION AND THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. IF AN EXEMPTION IS CLAIMED, THE PURCHASER FURTHER CERTIFIES THAT HE/SHE IS AUTHORIZED TO CLAIM THIS EXEMPTION AND KNOWLEDGE THAT I/WE MAY LOSE MY/OUR OPERATING PRIVILEGE(S) OR VEHICLE REGISTRATION(S) FOR FAILURE TO MAINTAIN FINANCIAL RESPONSIBILITY ON THE CURRENTLY REGISTERED VEHICLE FOR THE PERIOD OF REGISTRATION. I/WE ACKNOWLEDGE THAT I/WE MAY BE SUBJECT TO A FINE NOT EXCEEDING \$5,000 AND IMPRISONMENT OF NOT MORE THAN TWO YEARS FOR ANY FALSE STATEMENT.							
	1ST ASSIGNMENT	Signature of Seller		Signature of Co-Seller				
	2ND ASSIGNMENT	Signature of Second Purchaser or Authorized Signer		Signature of Seller				
		Signature of Co-Purchaser/Title of Authorized Signer		Signature of Co-Seller				
H. ADDITIONAL TITLE INFORMATION	NOTE: If a co-purchaser other than your spouse is listed and you want the title to be listed as "Joint Tenants With Right of Survivorship" (On death of one owner, title goes to surviving owner.) CHECK HERE <input type="checkbox"/> . Otherwise, the title will be issued as "Tenants in Common" (On death of one owner, interest of deceased owner goes to his/her heirs or estate)							
						NOTE: IF THE VEHICLE IS BEING LEASED, CHECK THIS BLOCK <input type="checkbox"/> . IF BLOCK IS CHECKED, COMPLETE AND ATTACH FORM MV-1L.		
						If your registration documents are not received within 60 days, please contact PennDOT		
						MESSENGER NUMBER:		