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

2010 FEB -1 PM 3:56

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: 19-JAN-2010	Repository ☐
	Reference No.: 10300258

OWNER INFORMATION (Type or Print)

Name: [redacted]		Daytime Telephone Number: [redacted]	E-mail Address:
Address: [redacted]		Evening Telephone Number:	
City: ENID	State: OK	Zip Code: [redacted]	

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1G6DM57N230[redacted]	CADILLAC	CTS	2003

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
01-21-2003	MCNEVIN CADILLAC 1500 SAN PABLO AVE Berkeley, CA 94702	No: Cylinders	Premium 91 + ABOVE

Original Owner	Dealer's City	State	Zip Code
☒	Berkeley	CA	94702

Transmission Type			Multiple Failure:	Incident Date(s)
	☐ Antilock Brakes ☐ Cruise Control	Powertrain	yes	12-DEC-2009, Numerous dates in DEC 09 + JAN 2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 061000 ENGINE AND ENGINE COOLING: ENGINE	Failure Mileage	Failure Speed
Cam sensor defective Crank Shaft position Senor defective	88000	10

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			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 2003 CADILLAC CTS. WHENEVER THE CONTACT DROVE THE VEHICLE AT ANY SPEED INCLUDING APPROXIMATELY 10 MPH, THE VEHICLE SUDDENLY BEGAN TO STALL AND SHUT OFF WITHOUT NOTICE. THE VEHICLE WAS TAKEN TO THE DEALER AND THE CRANK SHAFT SENSOR AND THE ECM COMPUTER WERE REPLACED; HOWEVER, THE FAILURE CONTINUED TO OCCUR. THERE WERE NO PRIOR WARNINGS. THE CURRENT AND FAILURE MILEAGES WERE 88000.

The Dealer who is working on the car NOW is:
- Stuart Cadillac
301 N. Independence
ENID, OK 73701

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

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

The Car will cuts off steps immediately at any speed without warning. It is in the Shop Currently and all paperwork with is in it. The dealer Cannot find the problem. This is the 6th trip to the Shop in a month.

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

OKLAHOMA CITY OK 73

25 JAN 2010 PM 2T

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