



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: 09-AUG-2010
 Repository:
 Reference No.: 10348310

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
 Address: [REDACTED]
 City: REYNOLDSBURG State: OH Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address:
 Evening Telephone Number: [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: 1G4CW54K414 [REDACTED]
 Make: BUICK Model: PARK AVENUE Model Year: 2001
 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): 26-JUL-2010
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 180000 VEHICLE SPEED CONTROL, 120000 EXTERIOR LIGHTING, 070000 FUEL SYSTEM, GASOLINE, 091200 FUEL SYSTEM, OTHER: STORAGE: FUEL GAUGE SYSTEM, 121000 EXTERIOR LIGHTING: HEADLIGHTS
 Failure Mileage: 86743 Failure Speed: 70

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: DOTM9ABC036) 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: Number of Deaths: 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 2001 BUICK PARK AVENUE. WHILE THE CRUISE CONTROL WAS SET AT 70 MPH HE ATTEMPTED TO DISENGAGE IT, THE VEHICLE ACCELERATED OVER 70 MPH. THE CONTACT STATED THAT HE ALSO EXPERIENCED FAILURE WITH THE VEHICLES HEAD LIGHTS, HIGH BEAMS AND THE FUEL GAUGE GAVE AN INCORRECT READING. WHEN THE VEHICLE WAS OUT OF FUEL THE GAUGE DISPLAYED FULL AND WHEN THERE WAS NO FUEL IT ALSO DISPLAYED FULL. THE VEHICLE WILL BE TAKEN TO THE DEALER FOR DIAGNOSTIC TESTING. THE MANUFACTURER WILL BE CONTACTED. THE FAILURE MILEAGE WAS 86743 AND THE CURRENT MILEAGE WAS 88,651.

MAR 07 2011

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 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)

My Buick 2001 Park Avenue has sudden UNINTENDED ACCELERATION AND this OCCURANCE CAN be duplicated AT ANY time. I would be willing to drive to West Liberty, Ohio if it could be scheduled for me to demonstrate this condition.

GM 1-800-521-7300 called
Buick 1-800-462-8782 Not called
Traffic Safety Adm 1-888-327-4236

ATTACH ADDITIONAL SHEETS IF NECESSARY

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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



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