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: JAN 19 2012 (23-DEC-2011)

Repository ☐

Reference No. 10441070

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City: CADYVILLE | State: NY | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

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
2G4WB52K1X1[redacted]	BUICK	REGAL	1999

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
5/28/10	Swinton Automotive			6	GAS
Original Owner ☐	Dealer's City: West Chazy, NY	State: NY	Zip Code		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
Auto	☑ Antilock Brakes ☑ Cruise Control		engine	16-FEB-2011

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING	Failure Mileage	Failure Speed
	100000	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: 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	0	0	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 BUICK REGAL. THE CONTACT STATED THAT WHILE THE VEHICLE WAS PARKED, A FIRE STARTED IN THE ENGINE. THE FIRE DESTROYED THE VEHICLE. THE CONTACT STATED THAT THE FIRE BEGAN FROM DROPS OF ENGINE OIL ON THE EXHAUST MANIFOLD. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN I.D. NUMBER: 08V118000 (ENGINE AND ENGINE COOLING) AND CALLED THE MANUFACTURER. THE MANUFACTURER STATED TO THE CONTACT THAT DUE TO THE FIRE AND BECAUSE THE VEHICLE WAS PRE-OWNED THERE WAS NOTHING THEY COULD DO TO ASSIST WITH THE FAILURE. THE FAILURE MILEAGE WAS 100,000.

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