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	Repository ☐
30-MAR-2012	Reference No. 10453591

JUN 0 1 2012

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address	[redacted]	Evening Telephone Number [redacted]	
City LAPEER	State MI	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
1G4HR54K344[redacted]	BUICK	LESABRE	2004

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City Davison	State MI	Zip Code		
Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 23-MAR-2012	

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM	Failure Mileage ~~98000~~ 92,994	Failure Speed 30

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 2004 BUICK LESABRE. WHILE DRIVING APPROXIMATELY 30 MPH, THE CONTACT NOTICED THAT THE SPEEDOMETER WAS FUNCTIONING ERRATICALLY. THE FAILURE RECURRED INTERMITTENTLY. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC FOR DIAGNOSTICS WHERE THE MECHANIC ADVISED THE CONTACT THAT THE INSTRUMENT CLUSTER WOULD HAVE TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 98,000. It happened again on 5/1

So we had it repaired on 05/02/2012 See attached

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

DEBIT SALE

JIM WALDRON BUICK-GMC
1146 S STATE STREET
DAVISON, MI 484230000
TID: 00002715876

TIME: 03:57 PM DATE: 05/02/12

MERCHANT #: 84098058
EDS
DB 0603
INVOICE: 0000649868
APPROVAL CODE: 060499
SEQ: 007

TOTAL AMOUNT $1249.00
[redacted]

CUSTOMER COPY

POWER OF ATTORNEY KNOW ALL MEN BY THESE PRESENTS. DATE

That the undersigned does hereby constitute and appoint JIM WALDRON - BUICK - GMC my (our) true and lawful attorney to sign name, place and stead of the undersigned on any Insurance Checks or Drafts issued by Insurance Company covering any repairs to my (our) automobile authorized by myself (ourselves) in whatever manner is necessary to place check or draft in a cashable position.

I (we) hereby ratify and confirm whatever action said Attorney shall or may take by virtue hereof in the premises.

Witness ______ Assured ______

STATE REG. NO. F-135428

CELL: [redacted]

ADVISOR JOHN GRING 55390	TAG NO. 836		INVOICE DATE 05/02/12	INVOICE NO. BUCS619868
	LICENSE NO.	MILEAGE 92,994	COLOR LIGHT BRONZ	STOCK NO.
YEAR / MAKE / MODEL 04/BUICK/LESABRE/4 DOOR CXL			DELIVERY DATE 08/17/04	DELIVERY MILES 19
VEHICLE I.D. NO. 1 G 4 H R 5 4 K 3 4 4 [redacted]			CUSTOMER REP JEFF JARUZE	IN SERVICE DATE
F.T.E. NO.	P.O. NO.		R.O. DATE 05/02/12	
[redacted] BUSINESS PHONE	REPAIRS PROPERLY COMPLETED & CHECKED BY. AUTHORIZED REPRESENTATIVE X		ALL PARTS NEW UNLESS INDICATED OTHERWISE.	

JOB# 1 CHARGES

LABOR
J# 1 02PNZ TRIM AND RATTLES TECH(S):69590 175.00
SPEEDOMETER NEEDLE IS STUCK AT 140 MPH. LEFT TURN SIGNAL
LIGHT IS DISPLAYED. ISSUE ONLY OCCURS WHEN ITS RAINING.
PRNDL DOES NOT READ CORRECTLY.
REPLACED LEFT FRONT MARKER BULB AND SOCKET DUE TO CORROSION.
REPLACED CLUSTER.

MH

QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
1	25735403 574	CLUSTER 9.735	275.00	275.00
1	12335587	SOCKET 2.596	32.08	32.08
1	12450108	BULB 2.679	4.08	4.08
			TOTAL - PARTS	311.16

CC

PAID MAY 01 2012

PO#	VEND INV#	INV.DATE	DESCRIPTION	
30301		05/02/12	RENTAL#8/P14416	INTERNAL
30301		05/02/12	RENTAL REFUEL	0.00
			TOTAL - SUBLET	0.00

JOB# 1 TOTALS
LABOR 175.00
PARTS 311.16
JOB# 1 JOURNAL PREFIX BUCS JOB# 1 TOTAL 486.16

JOB# 2 CHARGES

LABOR
J# 2 35PNZZMULTIPOIN VEHICLE INSPECTION TECH(S):69590 0.00
MULTI-POINT VEHICLE INSPECTION
PERFORMED VISUAL MULTIPOINT VEHICLE INSPECTION

JOB# 2 TOTALS
JOB# 2 JOURNAL PREFIX BUCS JOB# 2 TOTAL 0.00

JOB# 3 CHARGES

LABOR
J# 3 04PNZ ENG NOISE-LEAKS TECH(S):69590 425.00
LOWER INTAKE GASKET IS LEAKING.
RESEALED LOWER INTAKE GASKET. CHANGED OIL AND FILTER.

QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE	
1	89017816	GSKT KIT 3.270	64.16	64.16
1	89017554	GASKET KI 3.270	39.89	39.89
1	19210284	FILTER 1.836	7.30	7.30
1	12346290	COOLANT 8.800	19.72	19.72
1	88864346	SEALANT 8.800	15.72	15.72
1	12565082	PIPE 1.097	3.83	3.83
1	24503423	PIPE ASM- 8.846	12.48	12.48
			TOTAL - PARTS	163.10

 [CONTINUED ON NEXT PAGE] 03:56pm

SERVICE INVOICE

...on
...ay.
...upport Your Community

JIM WALDRON BUICK GMC
1146 S. State Rd.
DAVISON, MI 48423
Telephone (810) 653-1000
www.jimwaldron.com

POWER OF ATTORNEY KNOW ALL MEN BY THESE PRESENTS. DATE ____________

That the undersigned does hereby constitute and appoint JIM WALDRON - BUICK - GMC my (our) true and lawful attorney to sign name, place and stead of the undersigned on any Insurance Checks or Drafts issued by Insurance Company covering any repairs to my (our) automobile authorized by myself (ourselves) in whatever manner is necessary to place check or draft in a cashable position.

I (we) hereby ratify and confirm whatever action said Attorney shall or may take by virtue hereof in the premises.

Witness ____________________ Assured ____________________

STATE REG. NO. F-135428

CELL: [redacted]

CUSTOMER NO. 10447	ADVISOR JOHN GRING 55390	TAG NO. 836	INVOICE DATE 05/02/12	INVOICE NO. BUCS619868
[redacted]	LICENSE NO.	MILEAGE 92,994	COLOR LIGHT BRONZ	STOCK NO.
LAPEER, MI [redacted]	YEAR / MAKE / MODEL 04/BUICK/LESABRE/4 DOOR CXL		DELIVERY DATE 08/17/04	DELIVERY MILES 19
[redacted]	VEHICLE I.D. NO. 1 G 4 H R 5 4 K 3 4 4 [redacted]		CUSTOMER REP. JEFF JARUZE	IN SERVICE DATE
	F.T.E. NO.	P.O. NO.	R.O. DATE 05/02/12	
[redacted] BUSINESS PHONE	REPAIRS PROPERLY COMPLETED & CHECKED BY: AUTHORIZED REPRESENTATIVE X		ALL PARTS NEW UNLESS INDICATED OTHERWISE.	

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G.O.G. & SUPPLIES-----------------------------------------------------
        1.0  5.0 QTS GOODWRENCH OIL    @    12.650   /UNIT                12.65
                                                      TOTAL - GOG         12.65

JOB#  3 TOTALS------------------------------------------------------
                                                      LABOR              425.00
                                                      PARTS              163.10
                                                      G.O.G.              12.65

                          JOB#  3 JOURNAL PREFIX  BUCS  JOB#  3 TOTAL    600.75

JOB#  4 CHARGES-----------------------------------------------------------------

LABOR-----------------------------------------------------------------
J# 4 05PNZ         TRANS PROBLEM                TECH(S):69590            106.80
         LOWER TRANSMISSION COOLER LINE IS LEAKING.
         REPLACED LOWER TRANS LINE.

PARTS------QTY---FP-NUMBER--------------DESCRIPTION------------------UNIT PRICE-
          1      15233586               PIPE 4.128                  24.60     24.60
                                                      TOTAL - PARTS       24.60

JOB#  4 TOTALS------------------------------------------------------
                                                      LABOR              106.80
                                                      PARTS               24.60

                          JOB#  4 JOURNAL PREFIX  BUCS  JOB#  4 TOTAL    131.40

ESTIMATE--------------------------------------------------------------
CUSTOMER HEREBY ACKNOWLEDGES RECEIVING
      ORIGINAL ESTIMATE OF  $1250.00 (+TAX)
TECHNICIAN CERTIFICATION----------------------------------------------
            69590                JAMIE HART               M192652

TOTALS------------------------------------------------------------------

WE'RE NOT SATISFIED UNTIL YOU'RE "COMPLETELY SATISFIED".
IF YOU HAVE ANY QUESTIONS, PLEASE CALL:                TOTAL LABOR....     706.80
  NEW CAR SALES:      SCOTT PETERS                     TOTAL PARTS....     498.86
  SERVICE DEPT:       SCOTT KOHAGEN                    TOTAL SUBLET...       0.00
  PARTS DEPT:         BRIAN SCOTT                      TOTAL G.O.G....      12.65
  COLLISION CENTER:   PHILLIP GRACE                    TOTAL MISC CHG.       0.00
  USED CAR SALES:     JOHN MAGARITIS                   TOTAL MISC DISC       0.00
  CUSTOMER SERVICE:   CONNIE HILL                      TOTAL TAX......      30.69
                                                                          --------
                                                       TOTAL INVOICE $    1249.00
* DESIGNATES THIS PART HAS A LIFETIME WARRANTY GUARANTEE
  ASK YOUR SERVICE CONSULTANT FOR DETAILS!
* * 0% ON NEW VEHICLES - SEE A SALES CONSULTANT FOR DETAILS

QUICK LUBE HRS: MON-FRI 8am-6pm  SAT 8am-4pm
SVC HRS: MON 7am-8pm TUES-FRI 7am-6pm SAT 8am-4pm
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CUSTOMER SIGNATURE

CUSTOMER COPY

[END OF INVOICE] 03:56pm

SERVICE INVOICE

The Reynolds and Reynolds Company ERAINTSI14E CC632973 O (01/11)