

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148	
U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print)		Date Received	Repository <input type="checkbox"/>
Name		OCT 31 2012 26-SEP-2012	Reference No. 10477143
Address		Daytime Telephone Number	E-rail Address
City	State	Evening Telephone Number	
CUBERLAND	RI		
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
2G4WD582481		BUICK	LACROSSE
Model Year		2008	
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
Nov. 2011	See photocopies enclosed	4 cyl	
Original Owner	Dealer's City	State	Zip Code
<input type="checkbox"/>	Attleboro		
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
	<input type="checkbox"/> Cruise Control		Incident Date(s):
			01-MAY-2012
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Codes: 130000 VISIBILITY, 162000 STRUCTURE: BODY, 140000 AIR BAGS, BRAKES (PWS)		Failure Mileage	Failure Speed
		20000	
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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	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 2008 BUICK LACROSSE. THE CONTACT STATED THAT WHILE THE BRAKES WERE DEPRESSED THE VEHICLE MADE A LOUD FRICTION SOUND AND THE AIR BAG LIGHT ILLUMINATED. THE VEHICLE WAS TAKEN TO THE DEALER WHO DIAGNOSE THAT THE FRONT BRAKE HUB SPEED SENSOR, THE WIRING HARNESS AND THE PASSENGER AIR BAG WIRING CONNECTOR TERMINAL WERE DEFECTIVE AND NEEDED TO BE REPLACED. IN ADDITION, THE CONTACT MENTIONED THAT THE DRIVER SIDE SUN VISOR WAS DEFECTIVE AND CAUSED A BLINDING SPOT. THE FAILURE MILEAGE WAS 20,000 AND THE CURRENT MILEAGE WAS 20,500.			
The windshield, roof design causes the visor to create a blind spot, when putting it down!			
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)

Prior to buying the car in May to Cerrore, I would hear and feel something when applying the brakes. Then finally in July the car's computer detected the problem. I believe thereafter the air bag light would be on while I drove. It wasn't until my husband said something that I took the car into the dealer not once, but twice to get the problem fixed.

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

PROVIDENCE

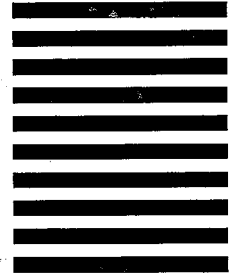
RI 028

15 OCT 2012

PM 5 1



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](http://www.safercar.gov)

or call:

Vehicle Safety Hotline  
888-327-4236

\*\*\*\*\*  
**NHTSA**  
www.nhtsa.gov

Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration



# Vehicle Inspection Report

## STATE OF RHODE ISLAND

### MOTOR VEHICLE INSPECTION AND MAINTENANCE



Page 1 of 1

SUMMARY RESULTS	OVERALL RESULT	EMISSIONS	FUNCTIONAL INSPECTION	SAFETY	STICKER NUMBER
	Pass	OBD	Pass	Pass	12090499

STATION INFORMATION				
AIRS NUMBER SY020120	INSPECTOR NAME Edward Da Silva	INSPECTOR LICENSE NUMBER CIT009123	STATION NUMBER ST000558	SOFTWARE VERSION 120102
STATION NAME TONY LUIS AUTO SALES and SERVICE				
STATION STREET ADDRESS 110 DEXTER STREET				
CITY CUMBERLAND RI			ZIP CODE 02864	

VEHICLE INFORMATION								
VIN 2G4WD582481	LICENSE PLATE NUMBER	PLATE TYPE Private Passenger	STATE RI	YEAR 2008	VEHICLE TYPE Passenger Car	GVWR 3875	ENGINE SIZE 3.80	VLT ROW ID 46636
MAKE BUICK	MODEL LACROSSE/ALLURE	ODOMETER 18659	FUEL TYPE Gasoline	CYLINDERS 6 Cyl	TRANSMISSION Automatic	DUAL EXHAUST Single		

**CONSUMER INFORMATION**

You have completed the Rhode Island Emissions and Safety Test. The Overall Result indicates whether your vehicle has passed or failed the inspection. You have until the end of the month on your current inspection sticker to obtain repairs and a reinspection. You are entitled to one free reinspection after you have your vehicle repaired as long as you return to this station within 30 days. If you have any questions, please call (401)737-0556

EMISSIONS TEST INFORMATION (N/A)									
POLLUTANT	READING	LIMIT	AVERAGE FOR PASSING VEHICLE	PASS/FAIL STATUS	TEST DATE	03/17/2012	TEST TIME	08:30:56	
HC PPM IDLE	OBD	OBD	---	OBD	FUEL ECONOMY	N/A	TEST TYPE	Initial	
HC PPM 2500 RPM	OBD	OBD	---	OBD	AUTHORIZATION NUMBER		11812115		
CO % IDLE	OBD	OBD	---	OBD	TEST ID NUMBER		1		
CO % 2500 RPM	OBD	OBD	---	OBD	AMOUNT PAID		\$39.00		

FUNCTIONAL INSPECTION							
FUEL CAP TEST	Pass	OBD READINESS	Pass	MIL COMMANDED	Pass	OBD TEST	Pass
Dashboard Mil Light Results:				KOEO	Pass	KOER	Pass

SAFETY INSPECTION RESULTS					
Back-Up Lamps	Pass	Ball Joints	Pass	Body Items	Pass
Brake Drums and Discs(see comments)	Pass	Brake Failure Warning Lamp	Pass	Brake Lining or Pads	Pass
Brake Performance	Pass	Brake Pedal Reserve	Pass	Bumper (Rear and Protection, over 10,000 lbs)	Pass
Door (Front Latches)	Pass	Emergency Brake	Pass	Exhaust System	Pass
Fender and Flaps	Pass	Floor and Other Panels	Pass	Fuel Tank (see comments)	Pass
Glass	Pass	Hazard Switch	Pass	Headlamps	Pass
Vehicle Alterations within Regulation	Pass	Horn	Pass	Master Cylinder	Pass
Mirrors	Pass	Parking Brakes	Pass	Plates and Plate Light	Pass
Reflectors	Pass	Seat Belts	Pass	Seats	Pass
Spring, Torsion Bars, Shocks	Pass	Steering, Alignment, and Suspension (see comments)	Pass	Tires (see comments)	Pass
Transmission	Pass	Wheels	Pass	Windshield Wipers	Pass
Windshield Condition	Pass	Hydraulic System	Pass	Universal Joints	Pass
Other Lamps (see comments)	Pass	Air Bags	Pass	Other	Pass

Comments and Other Defects:

**Service**  
**MULTI-POINT VEHICLE INSPECTION**





http://www.cerronegm.com


Phone: [REDACTED] Email: [REDACTED]

Customer Name: [REDACTED] VIN: 2G4WD582481 [REDACTED] Date: 05/24/2012

Repair Order #: 24132 Mileage: 17000 Tag #: \_\_\_\_\_ License #: \_\_\_\_\_

Checked and OK     May Require Attention Soon     Requires Immediate Attention

		<input checked="" type="checkbox"/> OnStar active <input checked="" type="checkbox"/> Enrolled in OVD <input type="checkbox"/> <input checked="" type="checkbox"/> Enrolled in DMN	<input checked="" type="checkbox"/> Service History Check <input checked="" type="checkbox"/> <input type="checkbox"/> Remaining engine oil life: <u>100</u> %    Reset: <input checked="" type="checkbox"/> NA: <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> Air Conditioning Performance
<input checked="" type="checkbox"/> WIPER BLADES  <input checked="" type="checkbox"/> LF <input type="checkbox"/> RF <input type="checkbox"/> <input type="checkbox"/> Rear (if applicable) <input checked="" type="checkbox"/> <input type="checkbox"/> Windshield condition <input type="checkbox"/> Cracks <input type="checkbox"/> Chips	<input checked="" type="checkbox"/> CHECK TIRES AND TREAD DEPTH <input checked="" type="checkbox"/> 8/32 or Greater <input checked="" type="checkbox"/> 7/32 to 4/32 <input checked="" type="checkbox"/> 3/32 or Less <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>LF <input checked="" type="checkbox"/> 4/32 PSI@: ___ set to: <u>30</u> PSI <input type="checkbox"/> Wear Pattern/Damage</p> <p>LR <input checked="" type="checkbox"/> 6/32 PSI@: ___ set to: <u>30</u> PSI <input type="checkbox"/> Wear Pattern/Damage</p> </div> <div style="width: 10%; text-align: center;">  </div> <div style="width: 45%;"> <p>RF <input checked="" type="checkbox"/> 3/32 or less PSI@: ___ set to: <u>30</u> PSI <input type="checkbox"/> Wear Pattern/Damage</p> <p>RR <input checked="" type="checkbox"/> 6/32 PSI@: ___ set to: <u>30</u> PSI <input type="checkbox"/> Wear Pattern/Damage</p> </div> </div> <p><input type="checkbox"/> Rotation needed    <input type="checkbox"/> Alignment needed    <input type="checkbox"/> Balance needed</p>		<input checked="" type="checkbox"/> CHECK BATTERY  <input checked="" type="checkbox"/> <input type="checkbox"/> Battery condition <input checked="" type="checkbox"/> <input type="checkbox"/> Battery cables and connections

<input checked="" type="checkbox"/> CHANGE ENGINE OIL & FILTER <input type="checkbox"/> N/A <input checked="" type="checkbox"/> CHECK FLUID LEVELS <table border="1"> <thead> <tr> <th>OK</th> <th>FILLED</th> <th>REQUIRES ATTENTION</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Engine oil <input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Brake fluid reservoir <input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Transmission (if equipped w/dipstick) <input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Coolant recovery reservoir <input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Power steering <input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td>Windshield washer <input type="checkbox"/></td> </tr> </tbody> </table>	OK	FILLED	REQUIRES ATTENTION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Engine oil <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Brake fluid reservoir <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Transmission (if equipped w/dipstick) <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coolant recovery reservoir <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Power steering <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Windshield washer <input type="checkbox"/>	<input checked="" type="checkbox"/> CHECK BRAKES/MEASURE FRONT AND REAR LININGS <p>Front: <input checked="" type="checkbox"/> 7 mm or Greater    <input checked="" type="checkbox"/> 6 mm to 4 mm    <input checked="" type="checkbox"/> 3 mm or Less</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>LF <input checked="" type="checkbox"/> 7mm / greater LR <input checked="" type="checkbox"/> 5mm</p> </div> <div style="width: 10%; text-align: center;">  </div> <div style="width: 45%;"> <p>RF <input checked="" type="checkbox"/> 7mm / greater RR <input checked="" type="checkbox"/> 5mm</p> </div> </div> <p>Rear: <input checked="" type="checkbox"/> 4 mm or Greater    <input checked="" type="checkbox"/> 3 mm    <input checked="" type="checkbox"/> 2 mm or Less                  Lowest Front Lining: <u>7mm</u>    Lowest Rear Lining: <u>5mm</u>  <input checked="" type="checkbox"/> <input type="checkbox"/> Brake system (also including lines, hoses and parking brake)             </p>
OK	FILLED	REQUIRES ATTENTION																				
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<input checked="" type="checkbox"/>	<input type="checkbox"/>	Windshield washer <input type="checkbox"/>																				

<input checked="" type="checkbox"/> ADDITIONAL CHECKS Inspect for visible leaks and visual condition:	
<input checked="" type="checkbox"/> <input type="checkbox"/> Fuel system (also including gas cap seating) <input checked="" type="checkbox"/> <input type="checkbox"/> Engine, transmission, drive axle, transfer case <input checked="" type="checkbox"/> <input type="checkbox"/> Engine cooling system <input checked="" type="checkbox"/> <input type="checkbox"/> Shocks and struts – also check operation <input checked="" type="checkbox"/> <input type="checkbox"/> Belts: engine, accessory, serpentine, and/or V-drive <input checked="" type="checkbox"/> <input type="checkbox"/> Hoses: engine, power steering and HVAC <input checked="" type="checkbox"/> <input type="checkbox"/> Engine air filter <input checked="" type="checkbox"/> <input type="checkbox"/> Passenger compartment air filter	<input checked="" type="checkbox"/> <input type="checkbox"/> Steering components and steering linkage <input checked="" type="checkbox"/> <input type="checkbox"/> CV drive axle boots or driveshafts and U-joints <input checked="" type="checkbox"/> <input type="checkbox"/> Exhaust system components <input checked="" type="checkbox"/> <input type="checkbox"/> Body components lubrication <input checked="" type="checkbox"/> <input type="checkbox"/> Restraint system component check <input checked="" type="checkbox"/> <input type="checkbox"/> Chassis components lubrication <input checked="" type="checkbox"/> <input type="checkbox"/> Drive axle (leak/other) <input checked="" type="checkbox"/> <input type="checkbox"/> Evaporative control system

Your Service Consultant: barbara sullivan    Your Service Technician: \_\_\_\_\_

# CERRONE CHEVROLET-BUICK-GMC

103 WASHINGTON STREET  
SOUTH ATTLEBORO, MA 02703  
(508) 399-6655  
WWW.CERRONEGM.COM

24132

CUMBERLAND RI		VEHICLE IDENTIFICATION		MILEAGE OUT	DATE OUT	INVOICE NO.
		2G4WD582481		19715	05/24/12	24132
YEAR	MAKE	MODEL		COLOR	TAG NO.	
08	BUICK	LACROSSE C		WHITE	00000	
CUST. NO.	LICENSE	HOME PHONE	WORK PHONE	STOCK NO.	PROD. DATE	SERV. ADV.
			-		00/00/00	112
CASH						
CUST. LABOR RATE	DELIV. DATE	DELIV. MILES	MILEAGE IN	DATE IN	IN-SERV DATE	
95.00	00/00/00		19715	05/24/12	00/00/00	

YOU WILL BE RECEIVING A SURVEY IN THE MAIL SOON  
GRADING US ON HOW WELL WE SERVICE YOUR VEHICLE  
\*\*IF\*\* YOU CAN'T GRADE US 100% SATISFIED, PLEASE CALL

SERVICE HOURS: MON-TUE-WED-THURS 7:00-8:00  
FRIDAY 7:00-5:00  
SATURDAY 7:00-NOON

LINE	OP. CODE	FAIL-CD	TECH	HOURS/QT	TYPE	AMOUNT
A						
Com LUBE OIL & FILTER						
Cor LUBE OIL & FILTER TOP FLUIDS AS NEEDED						
** LOF						
01			A23		C	13.00
			19210336 FILTER KI	1	C	2.72
			12345616 ENG/OIL	5	C	10.30
			123 WASTE/REMOVE	1	C	.93
Line Total.....						26.95
B						
Com FREE MULTI-POINT VEHICLE INSPECTION						
	0108		A23		I	
Line Total.....						
C						
Com Customer States noise on braking						
** ROAD TEST, INSPECT BRAKES OK, NO ABNORMAL NOISE HEARD						
			A23			
Line Total.....						

CUSTOMER COPY - PAGE 01

Printed: 05/24/2012 @ 13:31

**STATEMENT OF DISCLAIMER**  
The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

On behalf of servicing dealer, I hereby certify that the information contained hereon is accurate unless otherwise shown. Warranty services described were performed at no charge to owner. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any accident, negligence or misuse. Records supporting this claim are available for (1) year from the date of payment notification at the servicing dealer for inspection by manufacturer's representative.

\_\_\_\_\_  
CUSTOMER SIGNATURE

\_\_\_\_\_  
(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

**CERRONE CHEVROLET-BUICK-GMC**  
 103 WASHINGTON STREET  
 SOUTH ATTLEBORO, MA 02703  
 (508) 399-6655  
 WWW.CERRONEGM.COM

25702

CUMBERLAND RI		VEHICLE IDENTIFICATION		MILEAGE OUT	DATE OUT	INVOICE NO.	
		2G4WD582481		20004	07/09/12	25702 PART-CLOSE	
		YEAR	MAKE	MODEL	COLOR	TAG NO.	
		08	BUICK	LACROSSE C	WHITE	00000	
CUST. NO.	LICENSE	HOME PHONE	WORK PHONE	STOCK NO.	PROD. DATE	SERV. ADV.	TERMS
			- -		00/00/00	319	CASH
CUST. LABOR RATE	DELIV. DATE	DELIV. MILES	MILEAGE IN	DATE IN	IN-SERV DATE		
95.00	00/00/00		20004	07/09/12	05/26/08		
YOU WILL BE RECEIVING A SURVEY IN THE MAIL SOON GRADING US ON HOW WELL WE SERVICE YOUR VEHICLE **IF** YOU CAN'T GRADE US 100% SATISFIED, PLEASE CALL				SERVICE HOURS: MON-TUE-WED-THURS 7:00-8:00 FRIDAY 7:00-5:00 SATURDAY 7:00-NOON			
LINE	OP. CODE	FAIL-CD	TECH.	HOURS/QTY	TYPE	AMOUNT	
A							
Com Customer States ABS and Trac Lites on. FEELS LIKE SOMETHING IS DRAGGING. Cau short Cor Bearing And Hub Assembly, Front Wheel - Left - Replace; Diagnosis Time: You may claim up to the allowable labor hours depending on actual time performing diagnosis.; ** LIGHT NOT ON , SCAN CODES, C0245,C0041 R/F LOSS OF SPEED SIGNAL, ERRAT IC SIGNAL. REPLACE R/F HUB SPEED SENSOR AND HARNES. CLEAR CODES AND RO ADTEST OK							
	E2320		A96		W		
	X	88964168	*W-HUB	1	W		
		10340318	SENSOR KI	1	W		
				Line Total.....			

# CERRONE CHEVROLET-BUICK-GMC

103 WASHINGTON STREET  
SOUTH ATTLEBORO, MA 02703  
(508) 399-6655  
WWW.CERRONEGM.COM

28408

CUMBERLAND RI		VEHICLE IDENTIFICATION		MILEAGE OUT	DATE OUT	INVOICE NO.
		2G4WD582481		20546	09/21/12	28408
		YEAR	MAKE	MODEL	COLOR	TAG NO.
		08	BUICK	LACROSSE C	WHITE	00000
CUST. NO.	LICENSE	HOME PHONE	WORK PHONE	STOCK NO.	PROD. DATE	SERV. ADV.
			- -		00/00/00	324
CUST. LABOR RATE	DELIV. DATE	DELIV. MILES	MILEAGE IN	DATE IN	IN-SERV DATE	
98.00	00/00/00		20546	09/21/12	05/26/08	
YOU WILL BE RECEIVING A SURVEY IN THE MAIL SOON GRADING US ON HOW WELL WE SERVICE YOUR VEHICLE **IF** YOU CAN'T GRADE US 100% SATISFIED, PLEASE CALL				SERVICE HOURS: MON-TUE-WED-THURS 7:00-8:00 FRIDAY 7:00-5:00 SATURDAY 7:00-NOON		
LINE	OP. CODE	FAIL-CD	TECH.	HOURS/QTY	TYPE	AMOUNT
A						
Com Customer States service air bag light on intermittent ** DIAF SIR LIGHT ON, CK FOR COES HAS B0092 PASS PRES FAULT. INSPECT PASS PRES MODULE, REMOVE CONNECTOR & APPLLY DIELECTRIC GREASE & TIGHTEN TERMINALS. CLEAR CODES & RECHECK OK.						
	3602		A67		C	147.00
Line Total.....						147.00

# CERRONE CHEVROLET-BUICK-GMC

103 WASHINGTON STREET  
SOUTH ATTLEBORO, MA 02703  
(508) 399-6655  
WWW.CERRONEGM.COM

29183

CUMBERLAND RI		VEHICLE IDENTIFICATION		MILEAGE OUT	DATE OUT	INVOICE NO.
		2G4WD582481		20624	10/12/12	29183
YEAR	MAKE	MODEL	COLOR	TAG NO.		
08	BUICK	LACROSSE C	WHITE	00000		
CUST. NO.	LICENSE	HOME PHONE	WORK PHONE	STOCK NO.	PROD. DATE	SERV. ADV.
					00/00/00	319
CUST. LABOR RATE	DELIV. DATE	DELIV. MILES	MILEAGE IN	DATE IN	IN-SERV. DATE	
98.00	00/00/00		20624	10/12/12	05/26/08	

YOU WILL BE RECEIVING A SURVEY IN THE MAIL SOON GRADING US ON HOW WELL WE SERVICE YOUR VEHICLE  
**\*\*IF\*\* YOU CAN'T GRADE US 100% SATISFIED, PLEASE CALL**

SERVICE HOURS: MON-TUE-WED-THURS 7:00-8:00  
 FRIDAY 7:00-5:00  
 SATURDAY 7:00-NOON

LINE	OP. CODE	FAIL-CD	TECH.	HOURS/QTY	TYPE	AMOUNT
A						
Com Customer States air bag light on. Special Ordered Part Cau short Cor Inflatable Restraint Front Passenger Presence Module Replacement; Diag nosis Time; You may claim up to the allowable labor hours depending on actual time performing diagnosis.; ** DIAG SIR LIGHT ON, CK FOR CODES HAS B0092 PAS PRESS PERF CODE, DIAG AS A FAULTY PASS PRESS MODULE. REMOVE PASS FRONT SEAT & DISASSEMBLE & REPLACE PASS PRES MODULE & INSTALL SEAT. PERF MODULE SETUP & CLEAR CODES OK.						
	C8869		A67		W	
	X		19258129	1	W	MODULE KIT,REM
Line Total						

TOTAL-CUSTOMER NoCharge

CUSTOMER COPY - PAGE 01

Printed: 10/12/2012 @ 13:43

<p style="text-align: center; font-size: small;">STATEMENT OF DISCLAIMER</p> <p>The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.</p> <p style="text-align: center; margin-top: 20px;">_____ CUSTOMER SIGNATURE</p>	<p>On-behalf of servicing dealer, I hereby certify that the information contained hereon is accurate unless otherwise shown. Warranty services described were performed at no charge to owner. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any accident, negligence or misuse. Records supporting this claim are available for (1) year from the date of payment notification at the servicing dealer for inspection by manufacturer's representative.</p> <p style="text-align: center; margin-top: 20px;">_____ (SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)</p>
--	--