


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552 (b) (6) Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		AGENCY USE ONLY 100148 Date Received 27-AUG-2014 OCT 07 2014		Repository <input type="checkbox"/> Reference No. 10628883	
OWNER INFORMATION (Type or Print)							
Name				Daytime Telephone Number		E-mail Address	
Address				Evening Telephone Number		NOEMAIL@UNK.GOV	
City NEW HAVEN		State CT	Zip Code				
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 1G6KE54Y91U				Make CADILLAC		Model DEVILLE	Model Year 2001
Date Purchased 8-9-13		Dealers Name and Telephone Number PAULS			Engine: No: Cylinders 8		Fuel Type: 89
Original Owner <input type="checkbox"/>		Dealer's City HAMDEN		State CT	Zip Code 06511		
Transmission Type		<input checked="" type="checkbox"/> Antilock Brakes		Powertrain		Multiple Failure: Key Switch ENGINE SWITCH	
<input checked="" type="checkbox"/> Cruise Control						Incident Date(s) 09-AUG-2013	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Codes: ENGINE (PWS), 110000 ELECTRICAL SYSTEM ignition switch + engine car would shut OFF while driving, NO WARNING						Failure Mileage 96000	Failure Speed YES
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE							
Tire Make UNIROK tiger paw		Tire Model (Name or Number) 16			Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM19ABG036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location: Front right			
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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured 0		Number of Deaths 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 A 2001 CADILLAC DEVILLE. THE CONTACT STATED THAT THE VEHICLE STALLED SEVERAL TIMES WITH NO WARNING. THE VEHICLE WAS ALSO SMOKING AND OVERHEATING. THE SENSOR ILLUMINATED ON THE INSTRUMENT PANEL FOR OVERHEATING. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER WHO DIAGNOSED AND REPAIRED THE HEAD GASKET. AFTER THE REPAIR, THE FAILURE RECCURED AND THE VEHICLE WAS TAKEN BACK TO THE DEALER WHO DIAGNOSED THAT THE RODS AND CRANK SHAFT PLUS THE ENGINE NEEDED TO BE REPLACED. THE CONTACT WAS NOT ABLE TO GET THE PARTS FROM THE AUTHORIZED DEALER TO REPLACE THE ENGINE , RODS AND THE CRANK SHAFT. THE CONTACT WAS REFERRED AND GETTING AN INDEPENDENT MECHANIC TO PURCHASE THE PART FROM THE MANUFACTURER BUT THE PART WAS STILL NOT AVAILABLE. THE CONTACT LATER RECEIVED NOTIFICATION OF NHTSA CAMPAIGN ID NUMBER: 14V355000 (ELECTRICAL SYSTEM) AND WAS WAITING FOR PARTS TO REMEDY THE RECALL REPAIR. THE VEHICLE WAS NOT REPAIRED FOR THE ENGINE FAILURE AND THE RECALL REPAIR DUE TO THE PARTS NOT BEING AVAILABLE. THF MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 96,000.							
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)

When I brought the car 15 min after the Heeds
went then after it was fix Sometimes stop
while being driven but would start back up
Sometimes hesitating to start totally nothing happen
When up turn the key then the engine blew.

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



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**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**



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

