

4/11/15 5-2015



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

FOR AGENCY USE ONLY 100148

Date Received 28-APR-2015	Repository <input type="checkbox"/>
	Reference No. 10713316

Daytime Telephone Number [REDACTED]	E-mail Address [REDACTED]
Evening Telephone Number [REDACTED]	

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City STAUNTON State IN 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 1G6KD54Y9WU [REDACTED]	Make CADILLAC	Model DEVILLE	Model Year 1998
Date Purchased 6/08	Dealer's Name and Telephone Number Valley Motors		Engine: No: Cylinders V-8
Original Owner <input type="checkbox"/>	Dealer's City Spencer,	State In	Zip Code 47460
Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 14-APR-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)	Failure Mileage 172,295	Failure Speed
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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)	<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 <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
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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 1998 CADILLAC DEVILLE. THE CONTACT OBSERVED FUEL LEAKING ONTO THE ENGINE. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE IT WAS DIAGNOSED THAT THE FUEL RAIL FAILED AND NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS UNKNOWN. TH VIN WAS UNAVAILABLE.

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.

MIKE'S MUFFLER AND AUTO SERVICE LLC

301 W. JACKSON ST.
Brazil, IN 47834
Ph: 812-442-0969
Fx: 812-442-6052

<<Invoice>>

[REDACTED]
Employee:
Copy 2

Customer: [REDACTED]
Address: [REDACTED]
STAUNTON, IN

Phone Home/Work: [REDACTED]
Plate: [REDACTED]
Mileage-in: 172295
Mileage-out: 172295

208-7009

Vehicle: 98 CADILLAC DEVILLE

VIN: 1G6KD54Y9WU [REDACTED]

04/15/2015 11:15 am

Customer #: [REDACTED]

Page No.: 1

Services	Description	Tech	Qty	Price	Total
	R&R FUEL RAIL AND SEAL KIT	15	1.00	130.00	130.00
	VACUUM LINES ARE FOR FUEL PRESSURE REGULATOR(NO CHARGE)				
	CLEAN THROTTLE BODY(PORTS PLUGGED)		1.00	30.00	30.00
	INSTALL FRONT SWAY BAR LINKS		1.00	60.00	60.00
Part #	Description		Qty	Price	Total
12499784	FUEL RAIL		1.00	320.00	320.00
12499769	SEAL KIT		1.00	35.00	35.00
BULK	VACUUM LINES AND CONNECTORS		1.00	7.00	7.00
18161	SWAY BAR LINKS(BOTH SIDES)		2.00	50.00	100.00

OWNERS
MIKE HODGE CINDY HODGE
MIKE'S MUFFLER AND AUTO SERVICE

CASH \$ 732.82

Inspection: 0.00
Accessories: 0.00
Services: \$220.00
Parts: \$462.00

12 MONTH OR 12,000 MILE WARRANTY ON BRAKES(EXCLUDES MAIL AND LIFETIME WARRANTY ON ALUMINIZED MUFFLERS AND PIPES(2YR FLEET)
2-YEAR WARRANTY ON ALL OTHER EXHAUST SYSTEM PARTS AND FLEET LIFETIME WARRANTY ON STRUTS AND SHOCKS INSTALLED
LIFETIME WARRANTY ON CV AXLES INSTALLED
12 MONTH OR 12,000 MILE WARRANTY ON STARTERS AND ALTERNATORS
12 MONTH OR 12,000 MILE WARRANTY ON WATER PUMPS INSTALLED
CUSTOMER MUST HAVE RECEIPT FOR WARRANTY TO BE VALID
*****THANK YOU AND HAVE A NICE DAY*****

Subtotal: \$682.00
Shop Fee: \$18.48
Tax: \$32.34

Amount Charged: \$0.00
TOTAL: \$732.82

Authorized signature: