

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)		FORM NO. NHTSA-100148	
		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		Date Received SEP 21 2015	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address			Evening Telephone Number		
City	State	Zip Code			
NORTH RICHLAND HILLS	TX				
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
1G8JU54F02Y			SATURN	LS L200	2002
Date Purchased	Dealer's Name and Telephone Number		Engine:		Fuel Type:
1-22-09	CLASSIC CHEV. 817-481-0200		No: Cylinders 4		Gas
Original Owner	Dealer's City	State	Zip Code		
☒	GRAPEVINE	TX	76099		
Transmission Type	☐ Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)
Auto	☒ Cruise Control	automatic	Fuel system		10-JUL-2015
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)				Failure Mileage	Failure Speed
				80000	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: DOTM19ABC036)		☐ 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 <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i>					
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 2002 SATURN LS. THE CONTACT STATED THAT THERE WAS A FUEL ODOR COMING FROM THE VEHICLE. THE CONTACT DISCOVERED THAT FUEL WAS LEAKING FROM THE FUEL TANK. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHERE IT WAS DIAGNOSED THAT THE FUEL PUMP FRACTURED. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 80,000.					
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 to 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)

I constantly smelled gas fumes coming from my car while driving or parked. I drove to a mechanic and they said fuel was leaking on my fuel tank. So I took it to Eagle Transmission who then did the repairs stated on the enclosed invoice. Thank God I wasn't in an accident because I believe it would have caught fire.

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



IN TEXAS
DALLAS 750
03 SEP '15
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

or call:

**Vehicle Safety Hotline
888-327-4236**



U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation (NHTSA)
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382



Eagle Transmission

"The One To Trust"

4608 Colleyville Blvd. Colleyville, Texas 76034

(817) 577-3500

www.eaglecolleyville.com

Invoice Number

Invoice Date

Customer PO

7/17/2015

Customer				Vehicle			
Name				Year	2002	Make	SATURN
Address				Model	L200	Towed	No
City	N.R.H.	State	TX	Color	MAROON	Lic #	
Home				Vin #	1G8JU54F02Y		
Cell 1		Work	Ext	Miles	83052	Trans	4T40E Eng 2.2
Cell 2							
Description							
REMOVE GAS TANK AND INSPECT FOR LEAKS, REPLACE CRACKED FUEL PUMP/ MODULE ASSY AND REINSTALL GAS TANK. PRICE INCLUDES PARTS AND LABOR. Joshua270/1stcp							
CUSTOMER TO PAY 200.00 DOWN AND PAYMENTS OF \$200.00 PER MONTH UNTIL BALANCE IS PAID IN FULL. PAYMENT TO BE MADE ON THE 15-18 OF EACH MONTH STARTING IN AUGUST.							

Last Amount Paid

\$200.00

July

Paid By

Cash

Account Balance

\$490.00

Shop Cos

\$0.00

Total

\$690.00

EAGLE TRANSMISSION LOCATION IS INDEPENDENTLY OWNED AND OPERATED BY GP Shop #5 Inc

Hereafter known as "Warrantor" Any warranty, written or implied, is strictly by and between this independently owned and operated doing business as Eagle Transmission at the address shown on this invoice and the customer named on this invoice or Customer's repair order that corresponds to the written warranty and is non-transferable.

Local Limited Warranty
Which Ever Occurs First

12 months / 12,000 miles

Warrantor agrees to cover parts and labor listed on this invoice. All warranty terms are governed by and subject to the limited warranty agreement. Any warranty claim will not include malfunction caused by: fire, theft, collision, freezing, overheating, vandalism or water damage. Any warranty does not cover loss of time, inconvenience, lodging, towing, or any other incidental or consequential losses that may arise during the scheduled repair.

Unless stated in invoice description, transmission repairs conducted by this shop do not include repairing or replacing wiring, electrical components, electrical controls or sensors. Such repair are additional and may be required after a transmission repair or rebuild.

The vehicle must be brought back to this location for the 15 day quality recheck to validate the warranty, unless no warranty was given. Vehicles that are not brought back for the recheck will receive a 30 day warranty in lieu of the time and mileage warranty stated above. Customer agrees to the terms of this document.

Type of Repair

MECHANICAL

Eagle Transmission is a Lump Sum Contractor. Amount Paid Includes EPA-Hazardous Waste Disposal, Bolts, Nuts, and Misc. Shop Supplies. Some Front Wheel Drives May Require Alignment After Repairs

Customer Authorization

NOTICE PURSUANT TO SECTION 70.001, TEXAS PROPERTY CODE, I AM THE PERSON OR AGENT ACTING ON BEHALF OF THE PERSON, WHO IS OBLIGATED TO PAY FOR THE REPAIRS OF THIS MOTOR VEHICLE SUBJECT TO THIS REPAIR CONTRACT, I UNDERSTAND THAT THIS VEHICLE IS SUBJECT TO REPOSSESSION ACCORDING TO SECTION 9.503 TEXAS BUSINESS & COMMERCE CODE IF FULL PAYMENT IS NOT SECURED.

Warranty Agreement

Owner or Agent: X