

 INFORMATION Redacted PURSUANT TO THE FREEDOM OF 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 06-AUG-2015		Repository ☐ Reference No. 10746637	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address					
City MOORE		State OK	Zip Code	Evening Telephone Number	
<i>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).</i>					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1G6KD54Y95U		Make CADILLAC		Model DEVILLE	
Model Year 2005		Date Purchased 06/2015		Dealer's Name and Telephone Number BOB MOORE 405 261 5780	
Engine: No: Cylinders 8		Fuel Type: GAS		Original Owner ☐	
Dealer's City NORMAN		State OK		Zip Code 73072	
Transmission Type ☐ Antilock Brakes ☐ Cruise Control		Powertrain		Multiple Failure: Incident Date(s) 30-JUN-2015	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 010000 STEERING				Failure Mileage 97500	
				Failure Speed 10	
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: DOTM9ABC036)		☐ 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 ☐ Yes ☒ No		Fire ☐ Yes ☒ 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).					
I BOUGHT THIS CAR USED AND HAVE ONLY HAD IT A FEW WEEKS BUT ABOUT FIVE TIMES NOW I HAVE HAD THE POWER STEERING QUIT WHEN DRIVING IN THE RAIN. IT RETURNS IN SECONDS BUT I AM DISABLED AND IT IS VERY DIFFICULT FOR ME TO CONTROL THE CAR. LUCKILY THIS HAS ONLY HAPPENED AT LOW SPEEDS. I'M AFRAID OF BEING KILLED. I HAVE SINCE READ THAT THIS IS A WELL KNOWN PROBLEM. IN ALL SERIOUSNESS, DO FOLKS HAVE TO DIE BEFORE GM FIXES THE PROBLEM?					
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.					