U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline

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	Repository ☐
09-MAR-2016 APR 29 2016	Reference No. 10845724

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address	[redacted]	Evening Telephone Number	
City LAKE WORTH	State FL	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	Make	Model	Model Year
3G7DA03E22S[redacted]	PONTIAC	AZTEK	2002

Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
	PINES PONTIAC GMC BUICK 954.443.2500		6	Gasoline
Original Owner ☒	Dealer's City PEMBROKE PINES, FL	State FL / Zip Code		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
auto	☒ Antilock Brakes ☐ Cruise Control	FWD		16-FEB-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: FUEL/PROPULSION SYSTEM (PWS)	Failure Mileage	Failure Speed
STRONG FUEL SMELL, LEAKS GASOLINE BY THE FILL-UP TANK NECK, LEAKS GAS ON DRIVEWAY OR GARAGE FLOOR	120000	

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)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 PONTIAC AZTEK. THE CONTACT SMELLED A STRONG FUEL ODOR PRESENT IN THE VEHICLE WITHOUT WARNING. THE FAILURE WAS PERSISTENT. THE VEHICLE WAS NOT DIAGNOSED NOR REPAIRED. THE VIN WAS NOT INCLUDED IN NHTSA CAMPAIGN NUMBER: 07V349000 (FUEL SYSTEM, GASOLINE). THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 120,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

LATELY I NOTED A STRONG GASOLINE ODOR BY THE REAR OF THE VEHICLE. A VISUAL INSPECTION REVEALED A GASOLINE LEAK BY THE FUEL TANK INLET CONNECTION, WHEN THE TANK IS COMPLETELY FULL, IT SPILLS GAS ON THE GARRAGE FLOOR.

WENT TO THE DEALER AFTER I FOUND OUT IS A RECALL. THE DEALER REFUSED TO REPAIR FOR THE REASON THE CAR IS TOO OLD. THE DEALER LOCATED AT 5757 LAKE WORTH Rd, GREENACRES FL 33463, (561) 291-6054.

I MUST MENTION THAT I NEVER RECEIVED ANY NOTIFICATION RE: RECALL

ATTACH ADDITIONAL SHEETS IF NECESSARY

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1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use $300

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

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