

INFORMATION Redacted PURSUANT TO THE FREEDOM OF  
INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                      |                           |                                |                                    |                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------|--------------------------------|------------------------------------|----------------------------------------------------------------------|
| <b>DOT Auto Safety Hotline</b><br><b>Vehicle Owner's Questionnaire</b><br>To Report Vehicle Safety Defects<br><b>1-888-DASH-2-DOT</b><br><b>(1-888-327-4236)</b><br><b>INTERNET: www.nhtsa.dot.gov/hotline</b>                                                                                                                                                                                                                                                                                                                                                                   |                                                                                      |                           |                                | FOR AGENCY USE ONLY 100148         |                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                      |                           |                                | Date Received<br><br>13-APR-2016   | Repository <input type="checkbox"/><br><br>Reference No.<br>10855351 |
| <b>OWNER INFORMATION (Type or Print)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                      |                           |                                |                                    |                                                                      |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | Address                   |                                | Daytime Telephone Number           | E-mail Address                                                       |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                      | State                     | Zip Code                       | Evening Telephone Number           |                                                                      |
| JOSHUA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                      | TX                        |                                |                                    |                                                                      |
| <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>                                                                                                                                                                                                                                                         |                                                                                      |                           |                                |                                    |                                                                      |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                      |                           |                                |                                    |                                                                      |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side<br>2G4WD58266                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                      |                           | Make<br>BUICK                  | Model<br>LACROSSE                  | Model Year<br>2006                                                   |
| Date Purchased<br>6/28/2012                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Dealer's Name and Telephone Number<br>Cooper Car Center (817) 962-2507               |                           |                                | Engine:<br>No: Cylinders<br>3.8L V | Fuel Type:                                                           |
| Original Owner<br><input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Dealer's City<br>Ashland OR                                                          | State<br>OR               | Zip Code<br>97520              |                                    |                                                                      |
| Transmission Type                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Antilock Brakes                                             | Powertrain                | Multiple Failure:              | Incident Date(s)<br>31-OCT-2006    |                                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Cruise Control                                              |                           |                                |                                    |                                                                      |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                      |                           |                                |                                    |                                                                      |
| Vehicle Component Codes: 010000 STEERING, 140000 AIR BAGS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                      |                           |                                | Failure Mileage<br>80000           | Failure Speed                                                        |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                      |                           |                                |                                    |                                                                      |
| Tire Make                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Tire Model (Name or Number)                                                          |                           | Tire Size (Example P215/65R15) |                                    |                                                                      |
| DOT No. (Example: DOTM19ABC036)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Original Equipment<br><input type="checkbox"/> Prior Repair | Failure Location:         |                                |                                    |                                                                      |
| Tire Component Code                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                      |                           | Tire Failure Type:             |                                    |                                                                      |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                      |                           |                                |                                    |                                                                      |
| Make:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Date Manufactured:                                                                   | Model No./Name:           |                                |                                    |                                                                      |
| Seat Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Installation System:                                                                 |                           |                                |                                    |                                                                      |
| Child Seat Component Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Failed Part:                                                                         |                           |                                |                                    |                                                                      |
| <b>APPLICABLE INCIDENT INFORMATION</b><br>(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies).)                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                      |                           |                                |                                    |                                                                      |
| Crash<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No          | Number of Persons Injured | Number of Deaths               | Reported to Police<br>N            |                                                                      |
| Narrative Description of Incident(S), Crash(es), and Injury(ies).<br>Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;<br>i.e. parts repaired or replaced (and if old part is available).                                                                                                                                                                                                                                                                                                    |                                                                                      |                           |                                |                                    |                                                                      |
| TL* THE CONTACT OWNS A 2006 BUICK LACROSSE. WHILE DRIVING AT ANY SPEED. THE AIR BAG LIGHT REMAINED ILLUMINATED. THE VEHICLE WAS NOT DIAGNOSED NOR REPAIRED. IN ADDITION, WHILE DRIVING AT ANY SPEED AND MAKING A RIGHT OR LEFT TURN, THE STEERING WHEEL MADE A LOUD KNOCKING NOISE. THE VEHICLE WAS TAKEN TO THE DEALER WHERE THE POWER STEERING PUMP HAD A LEAK AND WAS REPLACED. THE FAILURE RECURRED. THE VIN WAS NOT INCLUDED IN NHTSA CAMPAIGN NUMBER: 09E005000 (STEERING). THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 80,000.  |                                                                                      |                           |                                |                                    |                                                                      |
| Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <span style="float: right;">ATTACH ADDITIONAL SHEETS IF NECESSARY</span>                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                      |                           |                                |                                    |                                                                      |
| 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. |                                                                                      |                           |                                |                                    |                                                                      |

To Whom it may Concern

Today's Date 5/16/16

I [REDACTED] purchased A Buick LaCrosse on 06/28/2012.

From 2919 South Cooper. Cooper Car Center .

Last year 2015, I received a letter on the Buick LaCrosse , for the dem headlight. GMC only has a temporary fix , not a permanent one at this time . Now I am experiencing some problems with the light on the Airbags, on both sides, driver and passenger. When I am driving the light for the airbag show that they are off, I always make sure I have my seat belt on ,and when I have my Mother are anyone on the passenger side the airbag light shows it's off. I have not had a wreck in this vehicle, And I hope I don't. I definitely feel that this is very hazardous to myself and to the passengers that drive with me.

When I purchased the car in 2012 I had experienced some knocking. As I am driving to turn either left or right there is still knocking I have taken it to a couple of mechanic they told me it needed power steering fluid so I purchased some and poured some in there, it did OK for while but then it came back , it only lasts a couple of months and the knocking stops and then it comes back, not sure what it is but I still hear the knocking and I still continue to put power steering fluid in it. This also I fear and feel that it is hazardous for myself as well as the passengers that drive with me and to others that are driving on the road it is very serious and dangerous for me to continue to drive this vehicle in this condition this is all I have to drive so I try my best to be as careful as possible.

Sincerely [REDACTED]

P.S

This is what I found on line. about 3mos ago.

**REMEDY:**

GM will notify owners, and dealers will install two key rings and an insert in the key slot or a cover over the key head on all ignition keys, free of charge. The recall began on September 23, 2014. Owners may contact General Motors customer service at 1-800-521-7300 (Buick), 1-800-458-8006 (Cadillac), and 1-800-222-1020 (Chevrolet). GM's number for this recall is 14299.

**NOTES:**

Owners may also contact the National Highway Traffic Safety Administration Vehicle Safety Hotline at 1-888-327-4236 (TTY 1-800-424-9153), or go to [www.safercar.gov](http://www.safercar.gov).

**RECALL Subject : STEERING KNUCKLE BREAKING/LOSS OF STEERING CONTROL**

**Report Receipt Date:** FEB 17, 2009  
**NHTSA Campaign Number:** 09E005000  
**Component(s):** STEERING



*Shatterstone  
metallic  
48624*

[All Products Associated with this Recall](#) ▼

[Details](#) ▲

[11 Associated Documents](#) ▼

**Manufacturer:** DORMAN PRODUCTS, INC.

**SUMMARY:**

DORMAN IS RECALLING 979 STEERING KNUCKLES, DORMAN P/NOS. 697-902 AND 697-903, SOLD UNDER DORMAN'S "OE SOLUTIONS™" BRAND NAME, AND NAPA P/NOS. 7-8502 AND 7-8503 WHICH WERE SOLD FOR REPLACEMENT USE ON THE VARIOUS VEHICLES LISTED ABOVE. A POTENTIAL MATERIAL OR DESIGN DEFECT COULD RESULT IN THE STEERING KNUCKLE BREAKING IN THE HUB AREA.

**CONSEQUENCE:**

A BROKEN STEERING KNUCKLE COULD RESULT IN LOSS OF STEERING CONTROL AND A POSSIBLE CRASH WITHOUT WARNING.

**REMEDY:**

DORMAN WILL NOTIFY OWNERS AND REPLACE THE DEFECTIVE STEERING KNUCKLES FREE OF CHARGE AND REIMBURSE THE REPAIR FACILITY OR OWNER FOR LABOR. THE RECALL BEGAN ON FEBRUARY 23, 2009. OWNERS MAY CONTACT DORMAN'S TOLL-FREE HOTLINE AT 1-800-523-2492 AND PRESS 5.

**NOTES:**

THIS RECALL ONLY PERTAINS TO AFTERMARKET DORMAN STEERING KNUCKLES AND HAS NO RELATION TO ANY ORIGINAL EQUIPMENT INSTALLED ON VEHICLES MANUFACTURED BY GENERAL MOTORS CORPORATION. OWNERS MAY ALSO CONTACT THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION'S VEHICLE SAFETY HOTLINE AT 1-888-327-4236 (TTY 1-800-424-9153), OR GO TO [HTTP://WWW.SAFERCAR.GOV](http://www.safercar.gov).

**RECALL Subject : LEATHER SEAT COVERS/AIR BAG SENSING SYSTEM**

**Report Receipt Date:** OCT 31, 2006  
**NHTSA Campaign Number:** 06V417000  
**Component(s):** AIR BAGS



[All Products Associated with this Recall](#) ▼

[Details](#) ▲

[11 Associated Documents](#) ▼

**Manufacturer:** GENERAL MOTORS CORP.

**SUMMARY:**

CERTAIN VEHICLES ORIGINALLY BUILT WITH CLOTH SEATS THAT WERE EQUIPPED WITH AN AUTOMATIC AIR BAG PASSENGER SENSING SYSTEM AND LATER REUPHOLSTERED WITH AFTERMARKET LEATHER SEAT COVER KITS ARE INVOLVED. TESTING HAS INDICATED THAT THE AFTERMARKET LEATHER SEAT COVERS CAN CAUSE THE PASSENGER SENSING SYSTEM TO MALFUNCTION.

**CONSEQUENCE:**

IF THE PASSENGER SENSING SYSTEM MALFUNCTIONS, THE FRONT AIR BAG ON THE PASSENGER SIDE MAY BE DISABLED WHEN IT SHOULD BE ENABLED, OR ENABLED WHEN IT SHOULD BE DISABLED. IN EITHER CASE, IN THE EVENT OF A CRASH THAT REQUIRES AIR BAG DEPLOYMENT, A

FRONT PASSENGER'S LEVEL OF INJURY MAY BE INCREASED.

**REMEDY:**

BECAUSE A REPLACEMENT LEATHER SEAT COVER THAT IS COMPATIBLE WITH THE PASSENGER SENSING SYSTEM IS NOT AVAILABLE, GENERAL MOTORS (GM) WILL REPURCHASE THESE VEHICLES IN ACCORDANCE WITH THE TERMS STATED IN GM'S LETTER TO OWNERS. THE RECALL BEGAN ON NOVEMBER 6, 2006. OWNERS SHOULD CONTACT GM AT 1-877-477-1022 TO BEGIN THE PROCESS OF REPURCHASING THEIR VEHICLE.

**NOTES:**

GM RECALL NO. 06102. CUSTOMERS MAY ALSO CONTACT THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION'S VEHICLE SAFETY HOTLINE AT 1-888-327-4236 (TTY 1-800-424-9153), OR GO TO [HTTP://WWW.SAFERCAR.GOV](http://www.safercar.gov).

1200 New Jersey Avenue, SE, West Building Washington DC 20590 USA 1.888.327.4236 TTY 1.800.424.9153  
6.0.19

# Search Results

## Recalls

4 Result(s)



## Investigations

0 Result(s)



## Complaints

206 Result(s)



## Manufacturer Communications

48 Result(s)



RECALLS: Displaying 1 - 4 out of 4

RECALL Subject : Headlamps may Fail

**Report Receipt Date:** AUG 14, 2015  
**NHTSA Campaign Number:** 15V519000  
**Component(s):** EXTERIOR LIGHTING



[All Products Associated with this Recall](#) ▼

[Details](#) ▲

[6 Associated Documents](#) ▼

**Manufacturer:** General Motors LLC

### SUMMARY:

General Motors LLC (GM) is recalling certain model year 2007 Pontiac Grand Prix, 2006-2009 Buick LaCrosse, 2006-2007 Buick Rainier, Chevrolet Trailblazer, GMC Envoy, 2006 Chevrolet Trailblazer EXT, GMC Envoy XL, 2006-2008 Isuzu Ascender, and Saab 9-7x vehicles. In the affected vehicles, the headlamp driver module (HDM) may overheat and fail, causing the headlamps and daytime running lights to not illuminate.

### CONSEQUENCE:

Headlamps that do not illuminate reduce the driver's ability to see the roadway and reduce the vehicle's visibility to oncoming vehicles, both of which increase the risk of a vehicle crash.

### REMEDY:

GM will notify owners, and dealers will replace the HDM, free of charge. Interim notices were mailed to owners on September 2, 2015. Dealers will install a new HDM Service part as an interim repair. Owners will receive a second notice when remedy parts are available. Owners may contact Buick customer service at 1-800-521-7300 or Pontiac customer service at 1-800-762-2737. GM's number for this recall is 14291.

### NOTES:

Owners may also contact the National Highway Traffic Safety Administration Vehicle Safety Hotline at 1-888-327-4236 (TTY 1-800-424-9153), or go to [www.safercar.gov](http://www.safercar.gov).

RECALL Subject : Ignition Switch may Turn Off

**Report Receipt Date:** JUN 23, 2014  
**NHTSA Campaign Number:** 14V355000  
**Component(s):** ELECTRICAL SYSTEM



[All Products Associated with this Recall](#) ▼

[Details](#) ▲

[28 Associated Documents](#) ▼

**Manufacturer:** General Motors LLC

### SUMMARY:

This defect can affect the safe operation of the airbag system. Until this recall is performed, customers should remove all items from their key rings, leaving only the ignition key. The key fob (if applicable), should also be removed from the key ring. General Motors LLC (GM) is recalling certain model year 2005-2009 Buick LaCrosse, 2006-2011 Buick Lucerne, 2000-2005 Cadillac DeVille, 2006-2011 Cadillac DTS, 2006-2014 Chevrolet Impala, and 2006-2007 Chevrolet Monte Carlo vehicles. In the affected vehicles, the weight on the key ring and road conditions or some other jarring event may cause the ignition switch to move out of the run position, turning off the engine.

### CONSEQUENCE:

If the key is not in the run position, the air bags may not deploy if the vehicle is involved in a crash, increasing the risk of injury. Additionally, a key knocked out of the run position will cause loss of engine power, power steering, and power braking, increasing the risk of a vehicle crash.

FRONT PASSENGER'S LEVEL OF INJURY MAY BE INCREASED.

**REMEDY:**

BECAUSE A REPLACEMENT LEATHER SEAT COVER THAT IS COMPATIBLE WITH THE PASSENGER SENSING SYSTEM IS NOT AVAILABLE, GENERAL MOTORS (GM) WILL REPURCHASE THESE VEHICLES IN ACCORDANCE WITH THE TERMS STATED IN GM'S LETTER TO OWNERS. THE RECALL BEGAN ON NOVEMBER 6, 2006. OWNERS SHOULD CONTACT GM AT 1-877-477-1022 TO BEGIN THE PROCESS OF REPURCHASING THEIR VEHICLE.

**NOTES:**

GM RECALL NO. 06102. CUSTOMERS MAY ALSO CONTACT THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION'S VEHICLE SAFETY HOTLINE AT 1-888-327-4236 (TTY 1-800-424-9153), OR GO TO [HTTP://WWW.SAFERCAR.GOV](http://www.safercar.gov).

1200 New Jersey Avenue, SE, West Building Washington DC 20590 USA 1.888.327.4236 TTY 1.800.424.9153

6.0.19

# ELIASER HIGH TECH AUTO REPAIR

2420 JENNINGS AVE.  
FORT WORTH, TX 76110  
(817) 920-9228

|                                                                                                                                                         |                                             |                                                                                      |               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------------------------------------------|---------------|
| RECEIVED                                                                                                                                                |                                             | PROMISED                                                                             |               |
| AM                                                                                                                                                      | PM                                          | AM                                                                                   | PM            |
| DATE 03/14                                                                                                                                              |                                             | CALL WHEN READY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |               |
| CUSTOMER NOTIFIED                                                                                                                                       |                                             | TIME                                                                                 |               |
| 1                                                                                                                                                       |                                             | AM                                                                                   |               |
| 2                                                                                                                                                       |                                             | PM                                                                                   |               |
| #1                                                                                                                                                      | DESCRIPTION                                 |                                                                                      |               |
| #2                                                                                                                                                      | SERVICE (LABOR)                             |                                                                                      |               |
| #                                                                                                                                                       | LUBE <input type="checkbox"/>               |                                                                                      |               |
|                                                                                                                                                         | CHANGE OIL <input type="checkbox"/>         |                                                                                      |               |
|                                                                                                                                                         | FLUSH TRANS. DIFF. <input type="checkbox"/> |                                                                                      |               |
| <p>1 Tune up. &amp; oil &amp; filter change</p> <p>2 power steering makes noise?</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p>                                |                                             |                                                                                      |               |
| <p>paid 275.30<br/>on E 3500</p> <p>This was for<br/>my husband's work<br/>Van, not the Buick Lacrosse</p>                                              |                                             |                                                                                      |               |
| TECHNICIAN #1                                                                                                                                           |                                             | TECHNICIAN #2                                                                        |               |
| If repair commencement is authorized but completion is not authorized a charge will be imposed for disassembly, reassembly or partially completed work. |                                             | HAZARDOUS WASTE (ENVIRO.)                                                            |               |
| QUANTITY                                                                                                                                                | GALLONS GAS                                 | OCTANE                                                                               | \$ AMOUNT     |
|                                                                                                                                                         | QUARTS OIL                                  | DETERGENT                                                                            | TOTAL SERVICE |
|                                                                                                                                                         | SOLVENT                                     | NON DETERGENT                                                                        | TOTAL PARTS   |
| HAZARDOUS WASTE (ENVIRO.)                                                                                                                               |                                             | OUTSIDE REPAIRS                                                                      |               |
| <input type="checkbox"/> CASH <input type="checkbox"/> CHARGE                                                                                           |                                             | GAS, OIL SOLVENT ENVIRO. CHG.                                                        |               |
| TOTAL GAS, OIL SOLVENT                                                                                                                                  |                                             | SUB-TOTAL                                                                            |               |
|                                                                                                                                                         |                                             | TAX                                                                                  |               |
|                                                                                                                                                         |                                             | TOTAL                                                                                |               |

| QUANTITY                                                                                                                                                                      | PART NUMBER AND DESCRIPTION | UNIT PRICE |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------|
| 6                                                                                                                                                                             | Spark plugs 650 each.       | 39.00      |
| 5                                                                                                                                                                             | Quarts of oil 4.00 each.    | 20.00      |
| 1                                                                                                                                                                             | oil filter 2.00             | 2.80       |
| <p>After repair is completed, vehicle needs to be picked up within 15 days or it will be towed at owner's expense. Agree by signing here.</p> <p>ADDITIONAL PARTS ON BACK</p> |                             |            |
| <p>ESTIMATED SERVICE DATE: / /</p> <p>TOTAL PARTS →</p> <p>SUBLET REPAIRS →</p> <p>TOTAL SUBLET REPAIRS →</p>                                                                 |                             |            |

I hereby authorize the above repair work to be done along with the necessary material, and hereby grant you and/or your employees permission to operate the vehicle herein described for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on this vehicle to secure the amount of repairs thereto. You will not be held responsible for loss or damage to the vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control. If it becomes necessary for you to employ a collection agency and/or an attorney to collect this account, I the undersigned agree to pay all court costs plus a reasonable attorney's fee and/or collection agency fee.

X

The Limited Warranties applying to the parts listed herein are those which may be offered by the manufacturer. We hereby expressly disclaim all warranties, either expressed or implied, including any implied warranties of the merchantability or fitness for a particular purpose and neither assume, nor authorize any other person to assume for the company any liability in connection with the sale of any parts and/or service. Buyer shall not be entitled to recover from the company any consequential damages, to property, damages or loss of time, loss of profits or income, or any other incidental damages.