

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 USE BY NHTSA ONLY 100148
Date Received: 28-APR-2016
Repository:
Reference No.: 10862053

OWNER INFORMATION (Type or Print)
Name: [REDACTED]
Address: [REDACTED]
City: BIG LAKE State: MN Zip Code: [REDACTED]
Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Evening Telephone Number: [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: 2G4WC532X51 [REDACTED]
Make: BUICK Model: LACROSSE Model Year: 2005
Date Purchased: [REDACTED] Dealer's Name and Telephone Number: [REDACTED] Engine: [REDACTED] Fuel Type: [REDACTED]
Original Owner: Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]
Transmission Type: Antilock Brakes Cruise Control Powertrain: [REDACTED] Multiple Failure: [REDACTED] Incident Date(s): 15-NOV-2015

FAILED COMPONENT(S)/PART(S) INFORMATION
Vehicle Component Code: 110000 ELECTRICAL SYSTEM Failure Mileage: 104000 Failure Speed: 60

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE
Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTM19ABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE
Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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: [REDACTED] Number of Deaths: [REDACTED] 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).

TL* THE CONTACT OWNS A 2005 BUICK LACROSSE. WHILE DRIVING APPROXIMATELY 60 MPH, THE VEHICLE STALLED WITHOUT WARNING. THE VEHICLE WAS ABLE TO RESTART, BUT THE FAILURE RECURRED. THE VEHICLE WAS TOWED TO A DEALER WHERE IT WAS DIAGNOSED THAT THE COMPUTER MODULE NEEDED TO BE REPLACED. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 104,000. *ALL electrical including lights were disabled*
7 opinion - Computer Module should monitor car performance - and should not be able to disable the car while being driven.

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.

CUSTOMER #:



INVOICE



BUICK-GMC
MONTICELLO, MN
www.westmetroauto.com

1001 HWY 25 S. - P.O. BOX 130
MONTICELLO, MN 55362

PHONE (763) 271-7800 · TOLL FREE (800) 501-4497

BIG LAKE, MN

PAGE 1

HOME:

CONT:

BUS:

CELL:

ASST. SERVICE MGR:419 JAMIE BLESI

COLOR	YEAR	MAKE/MODEL	VIN	UNIT NO.	MILEAGE IN/ OUT	TAG	
SILVER	05	BUICK LACROSSE	2G4WC532X51	210NVU	104864/104864	T4737	
DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
01JAN05 DD			18:00 26APR16			CASH	27APR16
R.O. OPENED		READY		OPTIONS:			
25APR16		27APR16		DLR: ENG:3.8_Liter_SFI			

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
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A CHECK AND ADVISE THE CUSTOMER WAS HAVING A PROBLEM LAST FALL WHERE IT WOULD JUST STALL FOR NO REASON HE DID NOT DRIVE IT AT ALL THIS WINTER SO THIS SPRING HE CHARGED THE BATTERY AND NOW THE CAR STARTS AND THEN STALLS RIGHT AWAY CHECK AND ADVISE

1008 ENGINE	517 CP					286.85	286.85
1	19210068 (S) REFURBISHED MODULE				448.08	448.08	448.08
PARTS:	448.08	LABOR:	286.85	OTHER:	0.00	TOTAL LINE A:	734.93

104864 CONFIRMED VEHICLE STARTS BUT WILL NOT STAY RUNNING. PUSHED INTO SHOP, SCANNED VEHICLE FOR CODES AND FOUND P0606 AND P0601 PCM INTERNAL FAILURE CODES STORED CURRENT IN PCM. PERFORMED PINPOINT TESTS TO VERIFY INTEGRITY OF CIRCUITS FOR PCM AND CONFIRMED INTERNAL FAILURE OF PCM. REPLACED PCM AND PROGRAMMED, WARRANTY CLAIM CODE - 104A7. PERFORMED CRANKSHAFT POSITION VARIATION LEARN PROCEDURE, CLEARED CODES AND TEST DROVE VEHICLE TO VERIFY REPAIR.

B CAR WAS TOWED IN BY PETERSONS TOWING

99 CUSTOMER HAS AAA INSURANCE- NO CHARGE FOR TOW

99 ISP							(N/C)
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE B:	0.00

C PERFORM MULTI-POINT VEHICLE INSPECTION.

FREE PERFORM MULTI-POINT VEHICLE INSPECTION.

517 ISP							(N/C)
PARTS:	0.00	LABOR:	0.00	OTHER:	0.00	TOTAL LINE C:	0.00

104864 PERFORMED MULTI-POINT VEHICLE INSPECTION.

SHOP SUPPLIES AND MATERIALS							20.00
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OUR SERVICE DEPARTMENT'S WARRANTY ON INSTALLED PARTS STANDS AT 12 MONTHS OR 12,000 MILES, WHICHEVER COMES FIRST. THANK YOU FROM WEST METRO BUICK GMC.

SERVICE AND PARTS HOURS Mon - Fri 7AM - 6PM Drop Box 24hours Phone : Local/Metro 763-271-7800 Fax : 763-271-7830 Toll Free : 1-800-501-4497	STATEMENT OF DISCLAIMER	DESCRIPTION	TOTALS
	The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.	LABOR AMOUNT	286.85
	ALL PARTS NEW ORIGINAL EQUIPMENT UNLESS OTHERWISE SPECIFIED.	PARTS AMOUNT	448.08
	CUSTOMER SIGNATURE	GAS, OIL, LUBE	0.00
		SUBLET AMOUNT	0.00
		SHOP SUPPLIES / ENVIRONMENTAL CHG	20.00
		TOTAL CHARGES	754.93
		LESS ADJUSTMENT	0.00
	SALES TAX	30.81	
	PLEASE PAY THIS AMOUNT	785.74	

Thank You!

CUSTOMER COPY

ODI 10862053 #



WEST METRO BUICK GMC
1001 Highway 25 South
Monticello, MN 55362
http://www.westmetroauto.com

Certified Service MULTI-POINT VEHICLE INSPECTION

Phone: (763) 271-7809

Email: kbruhn@westmetroauto.com

Customer Name: [REDACTED] VIN: 2G4WC532X51 [REDACTED] Date: 04/25/2016

Repair Order #: [REDACTED] Mileage: 104864 Tag #: 4737 License #: [REDACTED]

Checked and OK May Require Attention Soon Requires Immediate Attention

	<input type="checkbox"/> <input checked="" type="checkbox"/> OnStar active <input type="checkbox"/> <input checked="" type="checkbox"/> Enrolled in OVD <input type="checkbox"/> <input checked="" type="checkbox"/> Enrolled in DMN	<input checked="" type="checkbox"/> Service History Check <input checked="" type="checkbox"/> <input type="checkbox"/> Remaining engine oil life: ___ % Reset: <input type="checkbox"/> NA: <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> Exterior Lights (Headlamps, Tail Lamps, Turn Signals, etc.)	
	WIPER BLADES <input type="checkbox"/> LF <input type="checkbox"/> RF <input checked="" type="checkbox"/> <input type="checkbox"/> Rear (if applicable) <input checked="" type="checkbox"/> <input type="checkbox"/> Windshield condition <input type="checkbox"/> Cracks <input type="checkbox"/> Chips	CHECK TIRES AND TREAD DEPTH <input checked="" type="checkbox"/> 8/32 or Greater <input type="checkbox"/> 7/32 to 4/32 <input checked="" type="checkbox"/> 3/32 or Less LF <input checked="" type="checkbox"/> 8/32 or greater PSI@: <u>30</u> set to: ___ PSI <input type="checkbox"/> Wear Pattern/Damage LR <input type="checkbox"/> 5/32 PSI@: <u>28</u> set to: <u>30</u> PSI <input type="checkbox"/> Wear Pattern/Damage <input type="checkbox"/> Rotation needed <input type="checkbox"/> Alignment needed <input type="checkbox"/> Balance needed	

<input type="checkbox"/> CHANGE ENGINE OIL & FILTER N/A <input checked="" type="checkbox"/>	CHECK BRAKES/MEASURE FRONT AND REAR LININGS Front <input checked="" type="checkbox"/> 7 mm or Greater <input type="checkbox"/> 6 mm to 4 mm <input checked="" type="checkbox"/> 3 mm or Less LF <input checked="" type="checkbox"/> 7mm / greater RF <input checked="" type="checkbox"/> 7mm / greater LR <input type="checkbox"/> 3mm RR <input checked="" type="checkbox"/> 2mm Rear <input checked="" type="checkbox"/> 4 mm or Greater <input type="checkbox"/> 3 mm <input checked="" type="checkbox"/> 2 mm or Less Lowest Front Lining: <u>7mm / greater</u> Lowest Rear Lining: <u>2mm</u> <input checked="" type="checkbox"/> <input type="checkbox"/> Brake system (also including lines, hoses and parking brake)																					
CHECK FLUID LEVELS <table border="1"> <thead> <tr> <th>OK</th> <th>FILLED</th> <th>REQUIRES ATTENTION</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </tbody> </table>	OK	FILLED	REQUIRES ATTENTION	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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ADDITIONAL CHECKS

Inspect for visible leaks and visual condition:

<input checked="" type="checkbox"/> <input type="checkbox"/> Fuel system (also including gas cap seating)	<input checked="" type="checkbox"/> <input type="checkbox"/> Steering components and steering linkage
<input checked="" type="checkbox"/> <input type="checkbox"/> Engine, transmission, drive axle, transfer case	<input checked="" type="checkbox"/> <input type="checkbox"/> CV drive axle boots or driveshafts and U-joints
<input checked="" type="checkbox"/> <input type="checkbox"/> Engine cooling system	<input checked="" type="checkbox"/> <input type="checkbox"/> Exhaust system components
<input checked="" type="checkbox"/> <input type="checkbox"/> Shocks and struts – also check operation	<input checked="" type="checkbox"/> <input type="checkbox"/> Body components lubrication
<input checked="" type="checkbox"/> <input type="checkbox"/> Belts: engine, accessory, serpentine, and/or V-drive	<input type="checkbox"/> <input type="checkbox"/> Restraint system component check
<input checked="" type="checkbox"/> <input type="checkbox"/> Hoses: engine, power steering and HVAC	<input checked="" type="checkbox"/> <input type="checkbox"/> Chassis components lubrication
<input checked="" type="checkbox"/> <input type="checkbox"/> Engine air filter	<input checked="" type="checkbox"/> <input type="checkbox"/> Drive axle (leak/other)
<input type="checkbox"/> <input type="checkbox"/> Passenger compartment air filter	<input checked="" type="checkbox"/> <input type="checkbox"/> Evaporative control system

Your Service Consultant: Jamie Blesi Your Service Technician: Cameron Pearson



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Phone: (763) 271-7809

Email: kbruhn@westmetroauto.com

Customer Name: _____ VIN: 2G4WC532X51 _____ Date: 04/25/2016

Repair Order #: _____ Mileage: 104864 Tag #: 4737 License #: _____

DECLINED ADDITIONAL SERVICES RECOMMENDED

Description	Labor + Parts Price
Recommend Wiper Blade(s) Replacement	\$ 22.92
Recommend Rear Brakes (LR & RR) Replacement	\$ 254.39
Replace Exterior Bulb(s) left rear tail light	\$ 41.45

NOTES

Your Service Consultant: Jamie Blesi **Your Service Technician: Cameron Pearson**



GMC

WEST METRO BUICK GMC

JAMIE BLESİ
Service Consultant

MARK *of* EXCELLENCE
AWARD WINNER

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