

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

Date Received: 07-OCT-2016
Repository:
Reference No.: 10914450

OWNER INFORMATION (Type or Print)
Name: [Redacted]
Address: [Redacted]
City: ANN ARBOR State: MI 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: 1G6YK NBR 58H2 [Redacted]
Make: CADILLAC Model: XTS Model Year: 2017
Date Purchased: 8/30/2016 Dealer's Name and Telephone Number: Young Chev/Cadillac
Original Owner: Dealer's City: OWO SSO State: MI Zip Code: 48867
Transmission Type: Auto Antilock Brakes: Powertrain: Multiple Failure: Low Vehicle [Redacted] Incident Date(s): 01-OCT-2016
 Cruise Control

FAILED COMPONENT(S)/ PART(S) INFORMATION

Vehicle Component Codes: 160000 STRUCTURE, 130000 VISIBILITY/WIPER (PWS), 131000 VISIBILITY: WINDSHIELD
Failure Mileage: 250 Failure Speed: [Redacted]

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 2017 CADILLAC XTS. WHEN DRIVING IN THE SUN AT ANY SPEED, THE WINDSHIELD ACTED LIKE A MIRROR AND CAUSED EVERYTHING ON THE DASHBOARD TO REFLECT ONTO THE WINDSHIELD. THE DRIVER'S VISION WAS OBSCURED. THE VEHICLE WAS TAKEN TO A LOCAL DEALER WHERE IT WAS DIAGNOSED THAT THE FAILURE WAS A SAFETY ISSUE. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE AND STATED THAT NOTHING COULD BE DONE. THE FAILURE MILEAGE WAS 250.

SEE picture Attached
[Redacted]

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.

