



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

INFORMATION ACT (FOIA) 5 U.S.C. 552(B)(6)
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

26-OCT-2016

Reference No.
10919094

MAY 31 2017

OWNER INFORMATION (Type or Print)

Name

[Redacted Name]

Daytime Telephone Number

E-mail Address

Address

[Redacted Address]

Evening Telephone Number

City CHESANING

State MI

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
1G4CU541334 [Redacted]

Make BUICK

Model PARK AVENUE

Model Year 2003

Date Purchased 2013

Dealer's Name and Telephone Number PRIVATE PERSON

Engine: No. Cylinders 6

Fuel Type: GAS

Original Owner

Dealer's City

State

Zip Code

Transmission Type AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain SUPERCHARGED 3800 SERIES II

Multiple Failure: LEAKING INTAKE MANIFOLD VALVE COVER GASKETS LEAKING ON PLUGS

Incident Date(s) 10-FEB-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: FUEL/PROPULSION SYSTEM (PWS), 060000 ENGINE (PWS)

Failure Mileage 60000

Failure Speed ALL

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: DOTM19ABC036)

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 2003 BUICK PARK AVENUE. WHILE DRIVING AT ANY SPEED, THE CHECK ENGINE INDICATOR ILLUMINATED. THE CONTACT PULLED THE VEHICLE OVER AND NOTICED OIL DRIPPING DOWN ON THE SPARK PLUGS. THE VEHICLE WAS TAKEN TO A MECHANIC WHO DIAGNOSED THAT THE INTAKE MANIFOLD GASKET WAS LEAKING. THE VEHICLE WAS REPAIRED. THE MANUFACTURER WAS NOTIFIED. THE VEHICLE WAS REPAIRED. THE APPROXIMATE FAILURE MILEAGE WAS 60,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS TO THIS FORM AS NEEDED.

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.

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

THIS ENGINE (3800 SERRIS II) WAS BUILT IN FLINT, MI AT BUICK MOTOR DIVISION OF G.M. ALL 3800 SERIES II ENGINES WERE BUILT THERE ON THE SAME MOTOR LINE (I WORKED THERE FOR 30 YEARS) G.M. HAS DECIDED THOU THAT ONLY SOME VIN'S NEED REPLACING, ALTHOUGH THEY ARE THE SAME IN ALL VEICHEL'S.

ATTACH ADDITIONAL SHEETS IF NECESSARY

CHESBINE, MI

US Department of Transportation

National Highway Traffic Safety Administration

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



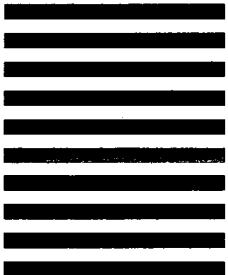
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NECESSARY
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IN THE
UNITED STATES

BUSINESS REPLY MAIL

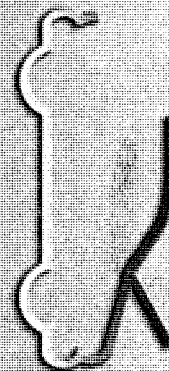
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382



Think your vehicle has a safety defect?



If so:
Use the enclosed form to file a report.

or visit:
www.safercar.gov

or call:
Vehicle Safety Hotline
888-327-4236



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



INVOICE

Vehicle Received: 02/23/2016

Invoice Date: 02/23/2016

2003 Buick - Park Avenue Ultra - 3.8L, V6 (231CI) VIN(1)
Lic #: -AZ Odometer In : 0

Home : [Redacted] Office : [Redacted]
Cust ID : [Redacted]

VIN #: 1GHC0541334 [Redacted]

Part Description / Number	Qty	Sale	Ext	Labor Description	Extended
INTAKE MANIFOLD GASKET SET 9433	1.00	90.11	90.11	CHECK ENGINE LIGHT ON	630.00
PLENUM GASKET 9H4786	1.00	17.06	17.06	FOUND LOWER INTAKE MANIFOLD LEAKING COOLANT AND ALSO PLASTIC INTAKE FITTINGS. RECOMMEND REPLACING INTAKE GASKETS ALSO RECOMMEND REPLACEMENT OF VALVE COVER GASKETS AND SPARK PLUGS	
VALVE COVER GASKET SET 6584	1.00	80.80	80.80	CHECK OIL LEAK	n/c
SPARK PLUG 12405	6.00	4.11	24.66	Hazardous Materials	2.50
INTAKE HEATER FITTING KNKL	1.00	10.11	10.11		
Shop Supplies			2.50		

VIN # 1GHC0541334 [Redacted]

Org. Estimate 873.17 Revisions 0.00 Current Estimate 873.17

Labor:	630.00
Parts:	225.24
SubTotal:	855.24
HazMat:	2.50
Tax:	15.43
Total:	873.17
Bal Due:	\$873.17

[Payments -]

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 car or truck herein described on street, highways or elsewhere for the purpose to testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. Warranty on parts and labor is one years or 12,000 miles whichever comes first. Warranty work has to be performed in our shop & cannot exceed the original cost of repair.

Signature _____ Date _____ Time _____

INVOICE

Vehicle Received: **02/23/2016**

Invoice Date: **03/02/2016**

2003 Buick - Park Avenue Ultra - 3.8L, V6 (231CI) VIN(1)
 Lic # : - AZ
 Odometer In : 56000
 Odometer Out : 56000

Home : [Redacted] Office : [Redacted]
 Cust ID [Redacted]

VIN # :

Part Description / Number	Qty	Sale	Ext	Labor Description	Extended
INTAKE MANIFOLD GASKET SET MS98014T	1.00	93.36	93.36	CHECK ENGINE LIGHT ON AND VEHICLE RUNS ROUGH DTC P0304	607.95
VALVE COVER GASKET SET vs50465r	1.00	80.80	80.80	FOUND LOWER INTAKE MANIFOLD LEAKING COOLANT BAD FILLING UP INTAKE VALLEY WITH COOANTAND ALSO PLASTIC INTAKE FITTINGS. REPLACE INTAKE GASKETS ALSO REPLACE VALVE COVER GASKETS AND SPARK PLUGS.	
PLENUM GASKET MS95744	1.00	17.06	17.06	CUST REQUEST REPLACEMENT OF FUEL FILTER	30.00
AC DELCO SPARK PLUG 41-601	6.00	4.11	24.66	Hazardous Materials	2.50
INTAKE HEATER FITTING 47065	1.00	6.37	6.37		
FUEL FILTER 86311	1.00	18.16	18.16		
Shop Supplies			2.50		

Org. Estimate 873.17	Revisions 0.00	Current Estimate 873.17	Labor: 637.95
			Parts: 242.91
			SubTotal: 880.86
			HazMat: 2.50
			Tax: 16.64
			Total: 900.00
			Bal Due: \$900.00

[Payments -]
 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 car or truck herein described on street, highways or elsewhere for the purpose to testing and/or inspection. An express mechanic's lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. Warranty on parts and labor is one years or 12,000 miles whichever comes first. Warranty work has to be performed in our shop & cannot exceed the original cost of repair.

Signature _____ Date _____ Time _____