


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

 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 05-JUN-2017 AUG 30 2017	Repository <input type="checkbox"/> Reference No. 10993208
OWNER INFORMATION (Type or Print)		
Name [REDACTED]		Daytime Telephone Number [REDACTED]
Address [REDACTED]		E-mail Address
City RURAL HALL	State NC	Zip Code [REDACTED]
Evening Telephone Number		
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 5GAET13M65Z [REDACTED]		Make BUICK Model RAINIER Model Year 2005
Date Purchased	Dealer's Name and Telephone Number Flow Chev.	Engine: No: Cylinders 8
Original Owner <input checked="" type="checkbox"/>	Dealer's City Winston Salem	Fuel Type: 995
State NC	Zip Code	
Transmission Type auto	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain All wheel drive Multiple Failure: Incident Date(s) 28-FEB-2017
FAILED COMPONENT(S)/PART(S) INFORMATION		
Vehicle Component Code: 120000 LIGHTING (PWS)		Failure Mileage 53800 Failure Speed 65
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: DOTM9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured
		Number of Deaths
		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 RAINIER. WHILE DRIVING 65 MPH, THE HEADLIGHTS FAILED WITHOUT WARNING. THE FAILURE OCCURRED TWO MORE TIMES. THE VEHICLE WAS TAKEN TO A LOCAL DEALER (MODERN CHEVROLET LOCATED AT 5955 UNIVERSITY PKWY WINSTON-SALEM, NORTH CAROLINA 27105) WHERE IT WAS DIAGNOSED THAT THE LOW BEAM MODULE FAILED. THE VEHICLE WAS REPAIRED. THE VEHICLE WAS NOT INCLUDED IN NHTSA CAMPAIGN NUMBER: 15V519000 (EXTERIOR LIGHTING). THE MANUFACTURER STATED THAT THE VEHICLE WAS NOT INCLUDED IN A RECALL. THE CONTACT WAS INFORMED THAT NHTSA DETERMINED WHICH VEHICLES TO INCLUDE IN RECALLS AND REFERRED THE CONTACT TO NHTSA. THE FAILURE MILEAGE WAS APPROXIMATELY 53,800.		
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.		

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

Lights went out at night when driving

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. 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

GREENSBORO

NC 274

21 AUG '17

PM 3 L



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

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



Advertisement for SaferCar.gov. Text includes: 'Think your vehicle has a safety defect?', 'Use the enclosed form to file a report.', 'www.safercar.gov', 'Vehicle Safety Hotline 888-327-4236', and the NHTSA logo.

CUSTOMER #:

MODERN CHEVROLET

INVOICE

DUPLICATE 1
PAGE 2

5955 University Parkway · Winston-Salem, NC 27105
Phone: (336) 722-4191
www.modernauto.com

HOME: CONT [REDACTED]
BUS: CELL [REDACTED] SERVICE ADVISOR: 217440 ANTHONY G ZARRELLA

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN / OUT	TAG	
	05	BUICK RAINIER	5GAET13M652 [REDACTED]		53930/53930	T4064	
DEL. DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
01JAN05 DD			18:00 03MAY17			CASH	03MAY17

R.O. OPENED	READY	OPTIONS:
08:25 03MAY17	10:48 03MAY17	

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
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RECOMMENDED BY: 217440 ZARRELLA DENIAL ADDED BY: 217440 ZARRELLA
 LINE ASSOCIATED: ESTIMATE: 148.24

DESCRIPTION: MOC31 TRANSMISSION FLUID EXCHANGE SVC
 REASON DENIED: DEC Customer declined
 PERSON CONTACTED: JEFF KISER
 COMMENTS: None

RECOMMENDED BY: 217440 ZARRELLA DENIAL ADDED BY: 217440 ZARRELLA
 LINE ASSOCIATED: ESTIMATE: 213.69

DESCRIPTION: MOC55 REAR DIFFERENTIAL
 REASON DENIED: DEC Customer declined
 PERSON CONTACTED: JEFF KISER
 COMMENTS: None

RECOMMENDED BY: 217440 ZARRELLA DENIAL ADDED BY: 217440 ZARRELLA
 LINE ASSOCIATED: ESTIMATE: 149.96

DESCRIPTION: MOC59 TRANSFER CASE SVC
 REASON DENIED: DEC Customer declined
 PERSON CONTACTED: [REDACTED]
 COMMENTS: None

RECOMMENDED BY: 217440 ZARRELLA DENIAL ADDED BY: 217440 ZARRELLA
 LINE ASSOCIATED: ESTIMATE: 129.93

WARRANTY DISCLAIMER: ALL PARTS AND ACCESSORIES ARE SOLD AND ALL REPAIRS ARE PROVIDED BY THE DEALERSHIP AS-IS. THE DEALERSHIP HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS AND IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PARTS OR PRODUCTS OR THE REPAIR. THE ONLY WARRANTIES ON PARTS AND ACCESSORIES OR REPAIRS ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER OR THE ORIGINAL PARTS DISTRIBUTOR AND ONLY SUCH MANUFACTURER OR DISTRIBUTOR SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES. CUSTOMER SHALL NOT BE ENTITLED TO RECOVER FROM THE DEALERSHIP ANY CONSEQUENTIAL DAMAGES, DAMAGES TO PROPERTY, DAMAGES FOR LOSS OF USE, LOSS OF TIME, LOSS OF PROFIT OR INCOME, OR ANY OTHER INCIDENTAL DAMAGES.

By signing below, you acknowledge that you were notified of and authorized the Dealership to perform the services/repairs itemized in this invoice and that you received (or had the opportunity to inspect) any replaced parts as requested by you. The vehicle is being returned to you in exchange for your payment of the Amount Due.

***SHOP SUPPLY COSTS:**
 We have added a charge equal to 10% of the total cost of labor, not to exceed \$19.99, to the Repair Order for shop supplies used in connection with this repair.

ALL PARTS ARE NEW UNLESS OTHERWISE INDICATED.

DESCRIPTION	TOTALS
LABOR AMOUNT	210.00
PARTS AMOUNT	55.22
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES *	19.99
TOTAL CHARGES	285.21
LESS INSURANCE	0.00
SALES TAX	19.26
PLEASE PAY THIS AMOUNT	304.47

DATE CUSTOMER SIGNATURE

AUTHORIZED DEALERSHIP REPRESENTATIVE SIGNATURE