

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		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	
Name: [REDACTED]		Date Received: 29-MAR-2021 MAY 26 2021		Repository <input type="checkbox"/> Reference No. 11405449	
Address: [REDACTED]		Daytime Telephone Number: [REDACTED]		E-mail Address:	
City: GADSDEN		State: AL		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 1GYS4CEF2B[REDACTED]		Make: CADILLAC		Model: ESCALADE	
Model Year: 2011		Date Purchased: 7-11-18		Dealer's Name and Telephone Number: DEVAN LOWE CAD. 256-442-9090	
Engine: No. of Cylinders: V-8		Fuel Type:		Original Owner: <input type="checkbox"/>	
Dealer's City:		State:		Zip Code:	
Transmission Type: AUTO. TRANS.		<input checked="" type="checkbox"/> Antilock Brakes		Powertrain:	
<input checked="" type="checkbox"/> Cruise Control		Multiple Failure:		Incident Date(s): 29-MAR-2021	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 140000 AIR BAGS				Failure Mileage:	
				Failure Speed:	
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):		<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* TAKATA RECALL. THE CONTACT OWNS A 2011 CADILLAC ESCALADE. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 21V050000 (AIR BAGS) HOWEVER, THE PART TO DO THE RECALL REPAIR WAS UNAVAILABLE. THE CONTACT CALLED DEVAN LOWE INC CADILLAC GMC LINCOLN (AL-77 & STEELE STATION RD, ATTALLA, AL 35954, (256) 344-4832) WHERE IT WAS CONFIRMED THAT THE PART WAS NOT AVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS NOT MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. PARTS DISTRIBUTION DISCONNECT.					
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.					