

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

DOT Form 100148 (Rev. 10-2004)

The National Highway Traffic Safety Administration

CAUTION: This form is printed on recycled paper. It is not to be used for other purposes.

Information: This form is printed on recycled paper. It is not to be used for other purposes. 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 CFR 53.971 (Sep. 3, 2004).

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FOR AGENCY USE ONLY 100148

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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

OWNER INFORMATION (Type or Print)

Name: [REDACTED]

Address: [REDACTED]

City: Key Largo State: FL 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 CFR 53.971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3GKALPEV4NL [REDACTED]

MAKE: GMC Model: TERRAIN Model Year: 2022

Date Purchased: 1/7/22 Dealer's Name and Telephone Number: Williamson Cadillac Engine: No. Cylinders: 4 Fuel Type: Gas

Original Owner: Dealer's City: Miami STATE: FL ZIP Code: 33156

Transmission Type: Auto Antilock Brakes Cruise Control Powertrain: Multiple Failure: Incident Date(s): 12JAN-2022

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 160000 STRUCTURE

Failure Mileage: 6.0 Failure Speed: 60

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: Michelin Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]

DOT No. (Example: DOTM1 9AB036) Original Requirement 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), injury(ies).)

Crash: Yes No Fire: Yes No

Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: N

Narrative Description of Incident(s), Crash(es), 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).

The contact owns a 2022 GMC Terrain. The contact stated upon purchasing the vehicle and driving 60 MPH to her residence for an hour, she smelled a strong glue, plastic and chemical-like odor. The contact stated that she parked the vehicle out in the sun and rolled the windows down; however, she could still smell a strong chemical odor inside the vehicle. The contact stated that the odor was significantly strong and caused her to have a sore throat while driving the vehicle. The contact stated that the odor smell was everywhere inside the vehicle; however, she had only been riding in the front driver's seat. The dealer was notified of the failure and advised the contact to take the vehicle to their location and they would spray ozone inside the cabin of the vehicle. The vehicle was not diagnosed or repaired. The manufacturer was not notified of the failure. The failure mileage was approximately 6.

Vehicle has chemical odors so bad I have to drive with windows down I park in sun daily & open windows - still after 6 months the Toxic fumes are still there - A little less - cant be healthy - I Am a cancer survivor - NOT GOOD FOR ME (OTO TOXINS)

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.