

**From:** [DataQuality, DataQuality \(NHTSA\)](#)  
**To:** [EVOQ \(NHTSA\)](#)  
**Subject:** FW: complaint 11525979  
**Date:** Tuesday, July 11, 2023 8:01:18 AM  
**Attachments:** [car\\_info.pdf](#)

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-----Original Message-----

From: [REDACTED] >  
Sent: Monday, July 10, 2023 3:12 PM  
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>  
Cc: [REDACTED]  
Subject: complaint 11525979

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OF 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

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

FOR AGENCY USE ONLY 100148

Date Received
08-JUN-2023

Repository

Reference No.
11525979

OWNER INFORMATION (Type or Print)

Name
Address
City Saint Louis State MO ZIP Code

Daytime Telephone Number
E-mail Address
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
2G4G55GX3G9
MAKE BUICK Model REGAL Model Year 2016
Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders Fuel Type:
Original Owner Dealer's City STATE ZIP Code
Transmission Type Antilock Brakes Powertrain Multiple Failure: Incident Date(s) 08-APR-2023
Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 010000 STEERING Failure Mileage 127000.0 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: DOTMAL 9ABC036) Original Requirement Failure Location:
Prior Repair
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), Injury(ies).)

Crash Yes [X] No Fire Yes [X] No Number of Persons Injured Number of Deaths 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 2016 Buick Regal. The contact stated while driving at an undisclosed speed during rainy weather, and making a left or right turn, the steering wheel intermittently made a grinding and clicking sound. No warning lights were illuminated. The dealer was notified of the failure and the contact was made aware of NHTSA Campaign Number: 16V108000 (Steering). The vehicle was then taken to another dealer however, the vehicle was not diagnosed or repaired. The contact was advised to call the manufacturer. The manufacturer was notified of the failure and the contact was advised to call the NHTSA Hotline. The failure mileage was approximately 127,000.

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.