



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

**POSTED
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03-MAR-00

FOR AGENCY USE ONLY

Date Received

Op-or _____
n-ff _____
od-rl _____
up-ltr _____

Reference No.

551195

Day Time Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner

Date **2,29,00**

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) **1G2NE15D0SM571058** Vehicle Make **Pontiac** Vehicle Model **Grand Am** Vehicle Year **1995** Current Odometer Reading **20088**

Purchase Date _____ Dealer's Name _____ City _____ State _____ Zip Code _____
 New Used Engine Size (CID/GAL) **2.3** Turbo Diesel
No. Cylinders **4** Gas Fuel Injection

Transmission Type Manual Automatic
Antilock Brakes Yes No
Restraint System Driverside Airbag Motorbat
 Passengerside Airbag 2-Point Belt 3-Point Belt
Cruise Control Yes No
Drivetrain Front Rear 4-Wheel
Vehicle Type Car Sports UT Truck Minivan Motorcycle Other
Body Style 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component **Ignition Switch** Part Name(s) **Electrical portion of ignition switch** Location Left Right Front Rear
Failed Part(s) Original Replacement
No. of Failures **1** Date(s) of Failure(s) **09/11/99** Mileage at Failure(s) **20,088** Vehicle Speed at Failure(s) _____
Failed Part(s) Available? Yes No NHTSA Previously Contacted? Yes No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash Yes No Fire Yes No
Number Persons Injured **0** Number of Fatalities **0** Estimated Property Damage **\$ 8,000.00** Reported to Police Yes No

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

To report defective or failed tires provide the following: DOT Number, Tire Manufacturer, Tire Name, Tire Size (include all numbers and letters).
Note: This information not required for normal operation tires.

DOT _____ Manufacturer _____ Tire Name _____ Complete Tire Size _____

TIRE SIZE
TIRE NAME
TIRE MANUFACTURER

U.S. DOT safety standard code
The number may be on the inner side of the tire and have up to 11 letters and numbers. Usually located near rim flange on side opposite whitewall or on either side of blackwall tire.

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.

