



US Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECT
1-888-DASH-2-DOT
1-888-327-4236
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY

RECEIVED
Date Received: 07 MAR 30 PM 12: 07

Od. Or _____
r. Lt. _____
od. Rt. _____
up. Ltr. _____

OFFICE OF DEFECTS INVESTIGATION

Reference No.

OWNER INFORMATION (Type or Print)

551621

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 or address to the vehicle manufacturer.

Signature of Owner _____

Date 03/24/2000

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (17 Digits) 1G6KD54Y7Y0256153	Vehicle Make CADILLAC	Vehicle Model DEVILLE	Vehicle Year 2000	Current Odometer Reading 1620
Purchased Date FEB 22 2000	Dealer's Name JOHN JONES GM CITY	Engine Size (CID/OCL) 4.6	No. Cylinders 4	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City SALEM	State IN	Zip Code 47167	
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
		Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Ult. <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other		Body Style <input checked="" type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s) SEE OTHER SIDE	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s):	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number Persons Injured	Number of Fatalities	Estimated Property Damage \$ _____	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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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
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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 maybe used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administration 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)

THE VISOR IS VERY WIDE AND CAN NOT BE FOLDED FORWARD IN SUCH A WAY THAT IT COVERS A SMALLER SEGMENT OF THE WINDSHIELD
IT RESULTED THAT THE TRAFFIC LIGHT IS NOT VISIBLE WITHIN 1 CITY BLOCK AND I DROVE THROUGH THE RED LIGHT (TWICE!). THE SEAT IS POSITIONED AS FAR BACK AS POSSIBLE AND AS LOW AS IT CAN BE GET. I AM 5'10" TALL.

RECOMMENDATION: EXCHANGE THE VISOR FOR A NARROWER SIZE

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590



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COMPLETE THIS FORM
OR

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and dial toll free at

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(DASH) 2 DOT



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