



**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
**REPORT VEHICLE SAFETY DEFECTS**  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: www.nhtsa.dot.gov/hotline

**FOR AGENCY USE ONLY**

Date Received: \_\_\_\_\_

Reference No. \_\_\_\_\_

**QC'd**

**559750**

**OWNER INFORMATION (Type or Print)**

[Redacted Owner Information]

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 02/02/01

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN.) (17 Digits) <b>1G3WH54T0ND307270</b>	(Located at bottom of windshield on driver's side)	Make <b>OLDS SUP.</b>	Model <b>CUT SUP.</b>	Year <b>92</b>
Purchased Date <b>7-02-92</b>	Dealer's Name <b>SHEA'S AUTO WORLD INC</b>	Engine Size (CID/CCL) <b>6</b>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City <b>2033-2065 E. MAIN Torrington CT</b>	State <b>CT</b>	Zip Code <b>06790</b>	No. Cylinders <b>6</b>
Manufacture Date (on driver's door or pillar)	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorbolt <input type="checkbox"/> Passengerside Air Bag <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 Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input 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**

Part Name(s) <b>brake calipers</b>	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name	Complete Tire Size
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). Attach photos if available.)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <b>0</b>	Number of Fatalities <b>0</b>	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). **NJ COURT - GM IN LAWSUIT. Notified to replace calipers.**  
**08/20/00 Munro Muffler, New Milford, replaced calipers [which I had no previous problem.] after munro replaced calipers, both started to burn up while I was driving. smoke/black calipers. witness to the scene: Mr. Kelly utility services, WATER CO. He put cones around my car. we thought it was going to blow. Munro Muffler of New Milford. refused to repair. Both calipers were replaced by A & D AUTO New Milford.**

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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)

A # D Auto gave me back the black calipers to Joe Munko muffer. one caliper burnt up 15 miles FROM my home. then that was repaired for \$478.00. Then driving 1 hr. Later the LEFT caliper burnt up and I ran out OF my car (shut ignition off) and almost got killed running across highway. my car was towed to windcor. I couldn't afford to get it right away & storage fees were \$100.00. then I had it towed for \$195.00 and then paid another \$478.00 for the left caliper to be replaced. I almost died from stress alone and my job has been in jeopardy.

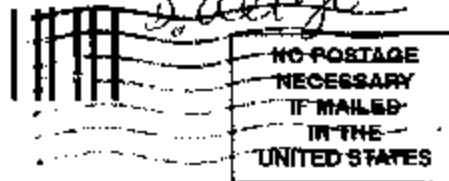
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Office: Business Penalty for Private Use \$300



**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  
Office of Defects Investigation, NSA-10.01  
400 7th Street, SW  
Washington, DC 20590



Complete and return or place in your car manual for future use



**VEHICLE OWNER'S QUESTIONNAIRE (VOQ)**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM

OR

**DASH 2 DOT**

and dial toll free at

**1-888-DASH-2-DOT**

**1-888-327-4236**

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(DASH) 2 DOT



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National Highway Traffic Safety  
Administration

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