

**Posted**  
 FEB 18 2002  
 U.S. Department of Transportation  
 National Highway Traffic Safety Administration

Auto Safety Hotline  
**Vehicle Owner's Questionnaire**  
 NATIONALWIDE 1-800-424-9393  
 DC METRO AREA (202) 368-0123

**COPIED**

**FOR AGENCY USE ONLY**

Date Received \_\_\_\_\_  
 Out-of- \_\_\_\_\_  
 in- \_\_\_\_\_  
 out-of \_\_\_\_\_  
 up- \_\_\_\_\_

**OWNER INFORMATION (Type or Print)**

[Redacted Owner Information]

Day Time Tele ( ) **564317**

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

Signature of [Redacted] Date 11/8/92

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>AG-4WF 5219V1474208</u>	Vehicle Make <u>BUICK</u>	Vehicle Model <u>REGAL GS</u>	Vehicle Year <u>1997</u>	Current Odometer Reading <u>73560</u>
Purchase Date <u>June 2001</u>	Dealer's Name _____		Engine Size (CID/CC/L) <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection	No. Cylinders <u>6</u>
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	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"/> Motorbell <input checked="" type="checkbox"/> Passengerside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" 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	Body Style <input type="checkbox"/> Hatch Back <input type="checkbox"/> Van <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> 2-Door

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Component	Part Name(s)	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)	Manufacturer Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICABLE ACCIDENT INFORMATION**

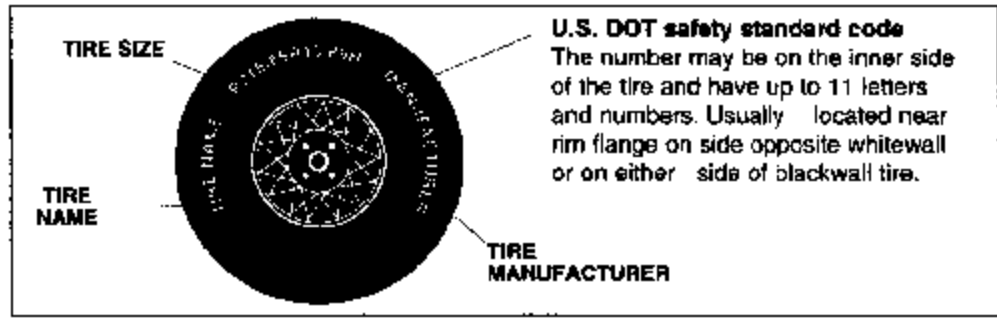
(Use reverse side for more detailed information)

Accident <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.

<b>D O T</b>	Manufacturer <u>GOODYEAR</u>	Tire Name <u>FAGLE LS</u>	Size <u>225-60X16</u>
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**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.

Narrative Description of Failure(s), Accident(s), and Injury(ies)

TIRES HAVE DEVELOPED THE FOLLOWING PROBLEMS:

FRONT- BAND SEPARATION DEVELOPED CAUSING "WOBBLE" OF STEERING WHEEL. PROBLEM WAS VERY PRONOUNCED AT LOW AND MODERATE SPEEDS - UNDER 50MPH. PREVIOUSLY THIS PROBLEM DEVELOPED ON ANOTHER VEHICLE SEVERAL YEARS AGO CAUSING TIRE FAILURE - STEEL BANDS PROTRUDED FROM TIRES. THIS HAS NOT AS YET HAPPENED OUT THIS CAR.

FRONT-END EXAMINATION SHOWS NO MECHANICAL PROBLEM

REAR TIRES HAVE DEVELOPED "A THUMPING" SENSATION CALLED "CUPPING".

ALL TIRES HAVE BEEN REPLACED BY MICHELIN SUMMAY TIRES OF SAME SIZE. DID TIRES HAVE BEEN RETAINED IN THE EVENT OF A POSSIBLE RECALL OR OTHER ACTION BY YOUR AGENCY

CAR IS NOW IN "DEAD STORAGE" IN CLEVELAND AND I AM IN FLORIDA UNTIL MID APRIL.

FLORIDA ADDRESS IS



Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

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 73179 WASHINGTON, D.C.

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

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400 7th Street, SW.  
Washington, DC 20590

