Form Approved: O.M.B. No. 2127-0003

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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received: 10-MAY-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No. 722523

[redacted]

Do you authorize NHTSA to provide a copy of 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____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G6KD52B4SU259274	CADILLAC	DEVILLE	1995	

Purchase Date: 01-MAY-1995
☒ New ☐ Used

Dealer's Name_____
City_____ State_____ Zip Code_____

Engine Size (CID/CC/L ____?____
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☒ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☒ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other_____ ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
06110000 08310000	FUEL:FUEL TANK ASSEMBLY ELECTRICAL SYSTEM:WIRING:HARNESS:FRONT:UNDERHOOD	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
1	27-APR-2000 19000 60	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

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

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☒ Yes ☐ No	0	0		☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WIFE STARTS DRIVING HOME AND ENGINE STOPS RUNNING, PULLS OFF OF ROAD ,CAR WON'T START,SHE CALLS HER HUSBAND AND THINKS THE CAR IS OUT OF GAS. HE PUTS 2 GLS IN AND CAR WON'T START, ADDS ANOTHER 2GLS,CAR WON'T START, CALLS TOW TRUCK, TRUCK LIFTS FRONT OF CAR AND THERE IS A LARGE SPOT OF GAS ON THE GROUND, THINKING THERE IS A HOLE IN THE TANK ,CAR IS TOWED TO GARAGE, NEW TANK IS ORDERED, 4DAYS LATER WE FIND THE PROBLEM IS THE WIRING HARNESS BURNED AND MELTED, OUTSIDE OF FUEL PUMP BURNED AND MELTED,TOP PART OF FUEL TANK BURNED AND MELTED, THIS IS A VERY SERIOUS HAZARD AND WARRANTS AN INVESTIGATION,CONTACTED GENERAL MOTORS AND THEY IGNORE THE PROBLEM. THANK YOU JAMES B. HARAKAL. *AK

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