Form Approved: O.M.B. No. 2-27-0028

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 19-AUG-2000	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ up_ltr ____ ____
	Reference No. 728420

[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
1G2WJ52K5VF262432	PONTIAC	GRAND PRIX	1997	

Purchase Date			
01-MAY-1998 ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L 3.8 LI 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	Part Name(s)	Location	Failed Part(s)
06110000	FUEL:FUEL TANK ASSEMBLY	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures		Failed Part(s) Available?	NHTSA Previously Contacted?
4	Date(s) of Failure(s) 15-AUG-2000 Mileage at Failure(s) 51128 Vehicle Speed at Failure(s) 0	☐ 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)

MY CAR HAS BEEN TO THE DEALER FOUR DIFFEFENT TIMES FOR FUEL PARTS RELATED FAILURES. JAN. 15, 1999, THE FUEL TANK SENSOR LEVEL WAS REPLACED. NOV. 3, 1999, THE ORIGINAL FUEL TANK PUMP/KIT WAS REPLACED. MANUFACTURER WAS NOTIFIED AND PAID FOR PARTS BUT NOT THE LABOR. JUNE 1, 2000, MY CAR WAS AGAIN TOWED IN AND THE FUEL TANK PUMP/ASSEMBLY KIT WAS REPLACED. AUG. 15, 2000, MY CAR WAS AGAIN TOWED AND THE FUEL TANK PUMP/SENDER KIT WAS REPLACED. I PICKED MY CAR ON AUGUST 19, 2000 FROM THE REPAIR DEALER AT APPROX. 5 P.M., AND AN HOUR AND A HALF LATER, MY CAR HAD STOPPED RUNNING. I HAD IT TOWED BACK TO THE DEALER, BUT THEY WERE CLOSED. I SPOKE WITH THE CUSTOMER SERVICE ASST. CENTER, USING THE 1-800 NUMBER, AND THEY WERE NOT VERY FRIENDLY NOR DID THEY WANT TO GIVE ME A

CONTINUE ON BACK IF NEEDED

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 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.