



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

Auto Safety Hotline

## Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 258

Date Received

08-FEB-2001

Od\_or \_\_\_\_\_  
R\_dt \_\_\_\_\_  
Pd\_rt \_\_\_\_\_  
Ip\_lfr \_\_\_\_\_

Reference No.

740534

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)<br><small>(Located at bottom of<br/>windshield on driver's side)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| 2G2AG19X2G9216032   | PONTIAC      | 6000          | 1986         |                          |

|   |  |  |  |
|---|--|--|--|
| Purchase Date<br>01-SEP-2090<br><input type="checkbox"/> New <input checked="" type="checkbox"/> Used | Dealer's Name _____<br>City _____ State _____ Zip Code _____ | Engine Size (CID/CCL) 2.8L<br>No Cylinders _____ | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |
|---|--|--|--|

|  |   |  |  |   |  |  |
|--|---|--|--|---|--|--|
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic | Antilock Brakes<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Restraint System<br><input checked="" type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Driverside Airbag<br><input type="checkbox"/> Passengerside Airbag<br><input type="checkbox"/> Motorbelt<br><input type="checkbox"/> 2-Point Belt | Cruise Control<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Drive Train<br><input checked="" type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | Vehicle Type<br><input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Sport Util Truck<br><input type="checkbox"/> Motorcycle | Body Style<br><input type="checkbox"/> 2-Door<br><input checked="" type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other _____ |
|--|---|--|--|---|--|--|

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

|                       |   |  |   |
|-----------------------|---|--|---|
| Component<br>13160000 | Part Name(s)<br>STRUCTURE:FRAME:MEMBERS AND BODY  | Location<br><input type="checkbox"/> Left<br><input type="checkbox"/> Right<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No. of Failures<br>2  | Date(s) of Failure(s)<br>30-NOV-2000<br>Mileage at Failure(s)<br>170000<br>Vehicle Speed at Failure(s)<br>5 | Failed Part(s) Available?<br><input type="checkbox"/> Yes <input type="checkbox"/> No  | NHTSA Previously Contacted?<br><input type="checkbox"/> Yes <input type="checkbox"/> 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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|---|---------------------------|----------------------|---------------------------|---|

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

THE LEFT AND RIGHT SUB-FRAME THAT SUPPORTS THE ENGINE AND TRANSMISSION BROKE (RUSTED OUT MAYBE) AT THE FRONT ,AROUND THE ISOLATORS. THIS DROPPED EVERYTHING DOWN ABOUT 6-8INCHES. LUCKILY THIS HAPPENED AT A VERY LOW SPEED. THE VEHICLE WAS VERY HARD TO STEER AND REALLY SHOULDN'T HAVE BEEN DRIVEN ANYWHERE. I WAS A MILE OR TWO FROM A MECHANIC SHOP, SO I DROVE IT THERE.

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 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.