



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

24-OCT-2001

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

753604

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) (Location at bottom of windshield and driver's side door) 1G4BR8378NW406596	Vehicle Make BUICK	Vehicle Model ROADMASTER	Vehicle Year 1992	Current Odometer Reading
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Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) 350 No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☒ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☒ Stationwagon ☐ Pick Up Truck ☐ Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12230000	Part Name(s) INTERIOR SYSTEMS: SHOULDER BELTS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 2	Date(s) of Failure(s) 17-OCT-2001 Mileage at Failure(s) 78500 Vehicle Speed at Failure(s) 0	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 ☐ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FOLD DOWN SEAT BEHIND DRIVER AND PASSENGER HINGE CUT THROUGH SHOULDER BELTS ON BOTH SIDES OF FOLD DOWN SEAT. THESE BELTS ARE AT LEAST HALF CUT THRU OR SEVERELY DAMAGED IN JUST THE LAST 2 YEARS. THE CUT APPEARS WITHIN 8" OF FLOOR OF VEHICLE. THEY HAD BEEN INSPECTED JUST TWO YEARS AGO. THIS IS SAFETY EQUIPMENT AND SHOULD BE THE RESPONSIBILITY OF MANUFACTURER TO REPLACE BELTS OR SUPPLY PLASTIC GUARD WHICH WOULD KEEP BELT FROM BEING CUT OR CRUSHED BY SEAT HINGE SHEARING ACTION.*AK

COPIES OF THIS FORM ARE:

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.