

785795

From: feedback@cartalk.com
To: Alberto <NHTSA> Jimenez
Date: 11/27/01 12:00PM
Subject: Car Talk VOQ submission


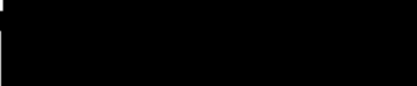
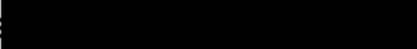
- * This data was submitted via a fill-in form at the Cartalk web site
- * (<http://www.cartalk.cars.com/Tools/nhtsa.pl>) If you have any problems
- * or suggestions regarding the format of this submission, send email
- * to webmaster@cartalk.com

SUBMISSION DATE: Tuesday, November 27th 2001 at 10:17:27 AM

VEHICLE OWNER'S QUESTIONNAIRE

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OWNER INFORMATION

NAME: 
 ADDRESS: 
 TELEPHONE: 

NHTSA authorized to send a copy of this report to the manufacturer: Yes

VEHICLE INFORMATION

VIN: YS3CL65M9P1014382
MAKE: SAAB
MODEL: 9000 CSE
YEAR: 1993

ODOMETER: 109000
PURCHASE DATE: 01/30/97
NEW OR USED: Used

DEALER NAME: Wayland Automotive
ADDRESS: wayland, MA 01778

ENGINE SIZE: 2.3L
CYLINDERS: 4

FUEL INJECTION: Yes
TURBO: Yes
FUEL TYPE: Gas
ANTILOCK BRAKES: Yes
CRUISE CONTROL: Yes

DRIVETRAIN: Front
DRIVER AIRBAG: Yes
PASSENGER AIRBAG: No
3-POINT BELT: Yes
MOTOR BELT: No
2-POINT BELT: No
BODY STYLE: Hatch Back

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT: Traction Control - kicks in without need- when there are no slick spots on the road, let alone snow. Kicks in on hills, sometimes a bump, god knows what causes it.

PART NAME(S): replaced to-date: safety valve, left front wheel sensor, bleeder valve, check valve

LOCATION:

NUMBER OF FAILURES: too many to note. First started at about 60900 miles.

DATE(S) OF FAILURES: 8/17/98, 10/23/98, 1/3/00, 9/7/00, 4/11/01, these are only repair dates where we could find something wrong!

MILEAGE AT FAILURE(S): 60,949, 64,884, 84,544, 95,209, 103,344

SPEED AT FAILURE(S): varies- from starts at 0 to cruising the highway

MANUFATURER CONTACTED: Yes

NHTSA CONTACTED: No

APPLICABLE ACCIDENT INFORMATION

ACCIDENT: No
FIRE: No

NUMBER OF PERSONS INJURED:
NUMBER OF FATALITIES:
ESTIMATED PROPERTY DAMAGE: \$

DRIVER AIRBAG DEPLOYED:
PASSENGER AIRBAG DEPLOYED:

REPORTED TO POLICE:

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

DOT NUMBER: DOT

TIRE MANUFACTURER:
TIRE NAME:
TIRE SIZE:

ADDITIONAL COMMENTS

Because the car's computer resets after the car is restarted, I have learned to shut the car off and restart when the TCS kicks in while driving. When TCS kicks in at high speeds, the engine is choked and it is like having the brakes come on without warning - and without benefit of tail-lights to warn following drivers. AT highway speeds this is dangerous and fortunately this has not caused an accident yet. I believe it is safer to restart the engine on the fly rather than try to pull off and do this on the shoulder as it causes less disturbance to the traffic flow. But it is still scary and dangerous nonetheless.

I have recently learned that 1993 was the first year SAAB installed TCS and there have been problems with it. My mechanic tells me that the dealers have simply been "throwing parts at it to solve the problem." Since SAABs last a long time, and I know I am not alone with this problem, I hope you all can help. SAAB refuses toon the basis of age and miloage. If I had known the extent of the problem back in 97, I would have reported it then.

END OF FORM



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 1058

Date Received

27-NOV-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

785795

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) <small>(Lowercase letters "i" and "o" are not allowed)</small> YS3CL65M9P1014382	Vehicle Make SAAB	Vehicle Model 9000	Vehicle Year 1993	Current Odometer Reading
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Purchase Date 30-JAN-1997	Dealer's Name _____	Engine Size (CID/CC/L 4 CYL)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____	

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

Component 08600000	Part Name(s) TRACTION CONTROL SYSTEM	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 Failure 5	Date(s) of Failure(s) 17-AUG-1998	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) 60949		
	Vehicle Speed at Failure(s)		

APPLICATION INCIDENT INFORMATION

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

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE TRACTION CONTROL KICKS IN WITHOUT NEED WHEN THERE ARE NO SLICK SPOTS ON THE ROAD OR SOME TIMES A BUMP, IT ALSO ACTIVATES AT HIGH SPEEDS.ET

CONTINUED ON REVERSE

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.