



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 231

Date Received

27-FEB-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8004673

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)		Vehicle Make SATURN	Vehicle Model LS1	Vehicle Year 2000	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ 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 Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 13430000	Part Name(s) STRUCTURE:DOOR ASSEMBLY:HANDLE:INSIDE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	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	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

LEFT REAR BACK DOOR HANDLE HAD BROKEN OFF IN CONSUMER'S HANDS. FRONT HANDLE WAS REPLACED BY RECALL. PLEASE PROVIDE FURTHER INFORMATION. *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.

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 23:	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) 		DEFECTS INVESTIGATION Reference No. 8004673	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorized signature, please print name and address to the vehicle manufacturer.		YES ☒ NO ☐ Signature of Owner Date <u>2/16/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) <u>1G8JUB2F4YY639658</u>	Vehicle Make <u>SATURN</u>	Vehicle Model <u>LS1</u>	Vehicle Year <u>2000</u>
Purchase Date <u>APRIL 2000</u>		Current Odometer Reading <u>43677</u>	
Dealer's Name <u>SATURN of ST. GEORGE</u> City <u>ST. GEORGE</u> State <u>UT</u> Zip Code <u>84790</u>	Engine Size (CID/CC/L) No Cylinders <u>4</u>		
☒ New ☐ Used <u>NO</u>	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection		
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>13430000</u>	Part Name(s) <u>STRUCTURE:DOOR ASSEMBLY:HANDLE:INSIDE</u>	Location ☒ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>3</u>	Date(s) of Failure(s) <u>5/2001 2/2002</u> Mileage at Failure(s) <u>25,000 42,000</u> Vehicle Speed at Failure(s) <u>NA</u>	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 	Number of Fatalities
Estimated Property Damage 		Reported to Police ☐ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
LEFT REAR BACK DOOR HANDLE HAD BROKEN OFF IN CONSUMER'S HANDS. FRONT HANDLE WAS REPLACED BY RECALL. PLEASE PROVIDE FURTHER INFORMATION. *AK			
<i>Approximately one year ago the driver's inside door handle broke. The dealer replaced it. Then we received a recall notice. The dealer replaced the front passenger door handle. At that time we asked (over)</i>			
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.			

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail														
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)														
TIRE IDENTIFICATION NO.*														
D	O	T											MANUFACTURER/TIRE NAME	SIZE
* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.														
NARRATIVE DESCRIPTION (CONTINUED)														

them to replace the rear door handle. They refused telling us it was unnecessary. Approximately one month pass the rear left passenger door handle broke. The dealer agreed to replace it. We then demanded that they replace the right rear handle as well which they did. Thus, three trips to the dealer, after an extended history of failure were required to fix this problem.

• **Wissenschaft, Kultur, Kunst, Gesellschaft**