



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 436

Date Received

12-MAR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8005425

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 PONTIAC TRUCK	Vehicle Model TRANS SPORT	Vehicle Year 1998	Current Odometer Reading
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
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 15130000	Part Name(s) EQUIPMENT:ELECTRIC POWER ACCESSORIES:LOCKS:DOOR	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 26-FEB-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s)		
	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 ☐ 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)

AUTOMATIC SLIDING DOOR WILL NOT LATCH PROPERLY. A RECALL HAS BEEN ISSUED ON VEHICLE MAKE AND MODEL. THE DEALER HAS BEEN NOTIFIED. PLEASE PROVIDE ADDITIONAL INFORMATION.*AK

COPIES OF REPORTS ARE KEPT

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 438	
 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 742918 OFFICE INVESTIGATION 12-MAR-2002 02 APR 22 02 APR 22	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.		YES ☒ NO ☐ Signature of Owner Date <u>3/30/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) <u>16MDXG3E5H028144</u>	Vehicle Make <u>PONTIAC TRUCK</u>	Vehicle Model <u>TRANS SPORT</u>	Vehicle Year <u>1998</u>
Purchase Date <u>4-98</u>		Current Odometer Reading <u>40,000</u>	
Engine Size (CID/GAL) <u>3.4</u>	Engine Type ☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection		
No Cylinders <u>6</u>	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 ☐ Sport Utility ☐ Truck ☐ Motorcycle ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck		
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>15130000</u>	Part Name(s) <u>EQUIPMENT:ELECTRIC POWER ACCESSORIES:LOCKS:DOOR</u>	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>26-FEB-2002</u>	Mileage at Failure(s) <u>38,000</u>	Vehicle Speed at Failure(s) <u>38,000</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(es) on the back of this form)			
Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>
Estimated Property Damage <u>0</u>		Reported to Police ☐ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
AUTOMATIC SLIDING DOOR WILL NOT LATCH PROPERLY. A RECALL HAS BEEN ISSUED ON VEHICLE MAKE AND MODEL. THE DEALER HAS BEEN NOTIFIED. PLEASE PROVIDE ADDITIONAL INFORMATION.*AK			
CONTINUE ON BACK IF NEEDED			
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