



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 1039

Date Received

30-APR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8008813

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>(Locate at bottom of and/or on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1G3GR62C8S4131509	OLDSMOBILE	AURORA	1995			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input 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 type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000	Part Name(s) ENGINE	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	Dates of Failure(s) _____ Mileage at Failure(s) _____ RR Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

OIL LEAKS BETWEEN LOWER AND UPPER CRANK CASE IN ENGINE. ALSO, OIL BLOWS BACK ON CATALYTIC CONVERTER. DEALER CONTACTED. *AK

CONFIDENTIAL - NHTSA

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.

<p style="text-align: center;">DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p style="text-align: center;">NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline</p>	<p>FOR AGENCY USE ONLY 1039</p> <p>Date Received: 30-APR-2002</p> <p>Office: DEFECTS INVESTIGATION</p> <p>Reference No.: 8008813</p> <p>Work Number: _____</p> <p>Home Number: _____</p>
<p>OWNER INFORMATION (Type or Print)</p> <p>697232</p> <p>NORTHBORO MA</p>	

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

In the absence of an owner's signature, please print the name and address to the vehicle manufacturer.

Signature of Owner: _____ Date: 5/10/02

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G3GR62C8S4131509		OLDSMOBILE	AURORA	1995	66,943
Purchase Date	Dealer's Name		Engine Size (CID/CC/L)	Turbo Diesel Gas Fuel Injectio	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	N/A		4.9L	<input checked="" type="checkbox"/>	
City _____ State _____ Zip Code _____		No Cylinders	8	<input checked="" type="checkbox"/>	
Transmission Type	Antilock Brakes	Restraint System		Cruise Control	Drive Train
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type		Body Style			
<input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other		<input type="checkbox"/> Sport Util <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Motorcycle			
		<input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck			

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
05100000	ENGINE	<input type="checkbox"/> Left <input type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)
1	65K -> PRESENT		N/A
Failed Part(s)		NHTSA Previously	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

OIL LEAKS BETWEEN LOWER AND UPPER CRANK CASE IN ENGINE. ALSO, OIL BLOWS BACK ON CATALYTIC CONVERTER. DEALER CONTACTED. *AK

VEHICLE OWNER'S QUESTIONNAIRE



DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

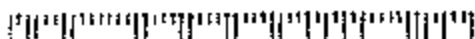
and dial toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.nhtsa.gov/hotline>



203 930 4000 1



U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

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400 Seventh St., S.W.
Washington, D.C. 20590

Department of Transportation
National Highway
Traffic Safety
Administration



Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

AURORA was purchased from family member on April 4, 2000. The auto contains a 4.0L DOHC Northstar engine. I noticed a small engine oil leak at 65,208 miles. I also realize that the warranty was only 3yrs/50k miles. I notified GM OLSMOBILE division about the oil leak and they told me that they would not help me with any extended warranty. I investigated the problem and found that many of the 1995 4.0L engines have failed at low mileage/time periods. GM acknowledges that this engine has a seal design problem. I do not feel that I should have to pay an estimated repair cost of approximately \$2000 to remove the engine and repair it. This auto is supposed to be a well built luxury sedan. The oil leak is definitely dangerous if it ignites on the catalytic converter.

I feel that all the 1995 4.0L DOHC V8 Aurora Northstar engines should be repaired at no cost to the owners under a safety recall/extended warranty.