



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 241

Date Received

22-MAY-2002

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od. rt
rp. ltr

Reference No.

8010313

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1G3WS52K3WF327224	OLDSMOBILE	INTRIGUE	1998			
Purchase Date <input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input checked="" type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Util <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	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 07390000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:OTHER PARTS	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) 18-MAY-2002 Mileage at Failure(s) 44000 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)

WHILE PARKED SHIFT CABLE MAY HAVE BROKEN, CAUSING SHIFT LEVEL TO REMAIN IN GEAR INSTEAD OF PARK. MANUFACTURER WAS NOTIFIED. FEEL FREE TO PROVIDE ANY 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

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 241

Date Received REC'D
22-MAY-2002

Title or
rt dt
od rt
up tr

DEFECTS INVESTIGATION
Reference No.
8010313

OWNER INFORMATION (Type or Print)

[Redacted] 755295
[Redacted]
KOKOMO IN [Redacted]

Work Number [Redacted]
Home Number [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature, please sign and return this form to the vehicle manufacturer.
Signature of Owner [Redacted] Date 6/5/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 1G3WS52K3WF327224 (Located at bottom of windshield or driver's side)
Vehicle Make OLDSMOBILE Vehicle Model INTRIGUE Vehicle Year 1998 Current Odometer Reading 47200

Purchase Date 5/1998 Dealer's Name Wiese Oldsmobile Engine Size (CID/CC/L) 3.8L Turbo Diesel Gas Fuel Injection
 New Used City Kokomo State IN Zip Code 46901 No. Cylinders 6

Transmission Type Automatic Manual
Antilock Brakes Yes No
Restraint System 3-Point Belt Driverside Airbag Passengerside Airbag Motorbelt 2-Point Belt
Cruise Control Yes No
Drive Train Front Rear 4 Wheel
Vehicle Type Car Van Minivan Other Sport Ult Truck Motorcycle
Body Style 2-Door 4-Door Stationwagon Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07390000 Part Name(s) POWER TRAIN: TRANSMISSION: AUTOMATIC: OTHER PARTS Location Left Right Front Rear Failed Part(s) Original Replacement

No. of Failures 1 Date(s) of Failure(s) 18-MAY-2002 Mileage of Failure(s) 44000 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 Damage 0 Reported to Police Yes No

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

WHILE PARKED SHIFT CABLE MAY HAVE BROKEN, CAUSING SHIFT LEVEL TO REMAIN IN GEAR INSTEAD OF PARK. MANUFACTURER WAS NOTIFIED. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION. *AK

Shift cable broke when shifting from 1st to Park. Vehicle therefore stayed in 1st gear. I called vehicle thinking it was in Park. Fortunately parking brake had been set. Therefore no injuries.

CONTINUE ON BACK IF NEEDED

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