Form Approved: OMB No. 2127-0042

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: 28-JUN-2002

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 8012948

[redacted]

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.) (Locate at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1G3HN52K3W4857620	OLDSMOBILE	88	1998	

Purchase Dat: ☐ New ☒ Used

Dealer's Name_____

City_____ State_____ Zip Code_____

Engine Size (CID/CC/L _____

No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
13720000	**STRUCTURE:HOOD ASSEMBLY:HINGE AND ATTACHMENTS**	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Dates of Failure(s) 07-JUN-2002 Mileage at Failure(s _____ Vehicle Speed at Failure(s) _____	Failed Part(s)	NHTSA Previously
		☐ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☐ No				☐ Yes ☐ No

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

HOOD WOULD NOT STAY OPEN. DEALER AND MANUFACTURER WERE NOTIFIED. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK

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 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.

Form Approved: O.M.B. No. 2127-0008

U.S. Department of Transportation
National Highway Traffic Safety Administration

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: 02 JUL 02 / 28-JUN-2002
OFFICE DEFECTS INVESTIGATION

Od_or ______
rt_dt ______
od_rf ______
up_ltr ______

Reference No. 8012948

OWNER INFORMATION (Type or Print)

[redacted] [redacted] 761609

ESTES PARK CO [redacted]

Work Number
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 [redacted]*ide your name and address to the vehicle manufacturer.*

Signature of Owner [redacted] Date 7/10/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G3HN52K3W4857620	OLDSMOBILE	88 LS	1998	33,140

Purchase Date: 6/4/98 ☒ New ☐ Used

Dealer's Name: King-Chamberlain
City: Loveland State: Co Zip Code: 80537

Engine Size (CID/CC/L): ___
No Cylinders: 6

☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
13720000	STRUCTURE:HOOD ASSEMBLY:HINGE AND ATTACHMENTS	☐ Left ☐ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement

No of Failures: Every time the hood has been opened since May 22, 2002

Date(s) of Failure(s): 07-JUN-2002 * May 22, 2002
Mileage at Failure(s): * Between 29630 + 32717
Vehicle Speed at Failure(s): N/A

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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	NONE	NONE		☐ Yes ☒ No

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

HOOD WOULD NOT STAY OPEN. DEALER AND MANUFACTURER WERE NOTIFIED. FEEL FREE TO PROVIDE ANY FURTHER INFORMATION.*AK

* The auto was serviced at the dealership on 5/8/02 and the mileage was 29,630. On 5/22 while enroute to a cafe in Estes Park, the check engine light came on. When I opened the hood it immediately fell. I am sure of this date as the following morning we began a trip. The last service was on 6/26 + the mileage was 32717.

CONTINUE ON BACK IF NEEDED

This vehicle has been serviced at the dealership 12 times since purchase + 2 times at other locations. Oldsmobile has denied any responsibility due to more than 36 mos

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

I once upon the hood and before I could pull the dip stick the hood fell. I was not injured and since that time I carry a stick to prop it open. This should not be necessary and the sudden closure could result in serious injury.

The auto has never been involved in any accident and is available for inspection most anytime.

Your help will be appreciated.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

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

VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

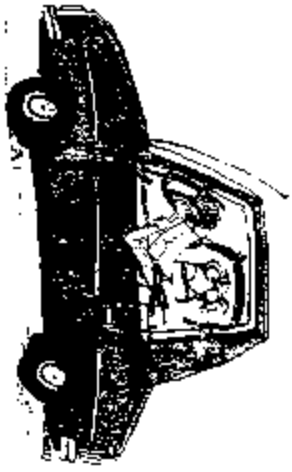
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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