 <p>DOT Auto Safety Hotline U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 252</p> <p>DATE RECEIVED 25-NOV-2002</p> <p>OFFICE OF INVESTIGATION</p>	
<p>OWNER INFORMATION (Type or Print)</p> <p>CINN OH</p>				<p>Reference No. 8023309</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>In the absence of your signature, provide your name and address to the vehicle manufacturer.</p> <p>Signature of Owner: _____ Date: 12/27/02</p>					
<p>VEHICLE INFORMATION</p>					
<p>Vehicle Identif. No. (VIN.) (Located at bottom of windshield on driver's side)</p> <p>1GBZF5280S3Z10082</p>		<p>Vehicle Make</p> <p>SATURN</p>	<p>Vehicle Model</p> <p>SL1</p>	<p>Vehicle Year</p> <p>1995</p>	<p>Current Odometer Reading</p> <p>11245 as of 12/27/02</p>
<p>Purchase Date</p> <p>APRIL 1995</p>		<p>Dealer's Name</p> <p>SATURN OF TRU-COUNTY/TAKE SWEENEY</p>		<p>Engine Siz (CID/CC/L)</p> <p>2L</p>	<p>Turbo Diesel Gas Fuel Injectio</p> <p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio</p>
<p><input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>		<p>City CINCINNATI State OH Zip Code 45246</p>		<p>No Cylinders</p> <p>4</p>	
<p>Transmission Type</p> <p><input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic</p>	<p>Antilock Brakes</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System</p> <p><input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt</p> <p><input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag</p>		<p>Cruise Control</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> NO</p>	<p>Drive Train</p> <p><input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>
				<p>Vehicle Type</p> <p><input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle</p> <p><input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other</p>	<p>Body Style</p> <p><input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other</p>
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Component</p> <p>01100000</p>	<p>Part Name(s)</p> <p>STEERING-WHEEL AND COLUMN, AIRBAG</p>		<p>Location</p> <p><input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear</p>		<p>Failed Part(s)</p> <p><input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement</p>
<p>No of Failures</p> <p>1</p>	<p>Date(s) of Failure(s)</p> <p>25-NOV-2002</p>		<p>Mileage at Failure(s)</p> <p>112000 - less than</p>	<p>Vehicle Speed at Failure(s)</p> <p>1 to ~25 mph over ~2.5 mi/h</p>	<p>Failed Part(s) Available?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3 mi/h</p>
					<p>NHTSA Previously</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4/26/02 phone</p>
<p>APPLICATION INCIDENT INFORMATION (Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)</p>					
<p>Crash</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Fire</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Number of Persons Injured</p> <p>0</p>	<p>Number of Fatalities</p> <p>0</p>	<p>Estimated Property Damage</p> <p>0</p>	<p>Reported to Police</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p>					
<p>WHILE PULLING OUT OF A PARKING SPACE SHE HEARD A KNOCKING NOISE COMING FROM THE STEERING COLUMN. PLEASE PROVIDE ADDITIONAL INFORMATION DEALER IS AWARE OF THE PROBLEM. TS (cont. from other side) Was told by manager he could not take the failed parts off the premises, but he took them anyway. My husband was told by the service technician over the phone that "steering systems fail." We received no other explanation.</p>					
<p>CONTINUE ON BACK IF NEEDED</p>					
<p>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.</p>					

Confirm customer status faster. As of 12/29/02, we have not been contacted by Saturn.

FVI - Dealership usually sends survey after every service appt. (e.g., oil change), sometimes even "Mini" Sweeney phones to

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

While backing out of a parking space, steering made a clicking sound. Over the next 2.5 miles, had less and less control of steering, which continued to "click" occasionally. After 0.5 miles, had no control of steering whatsoever. Came to a stop on our lawn, narrowly missing a tree. Car was towed to dealer. Was sold by service technician at Saturn that because I "turned the wheel so much" that the airbag had to be replaced.

When I asked why the steering failed, was told "We can't have any parts." Asked if my husband could see the failed parts. When we arrived, I'd pick up the repaired car, was told the broken parts were in the car. Not all the failed parts were in the car, so he asked the manager to see the rest. (over)



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

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

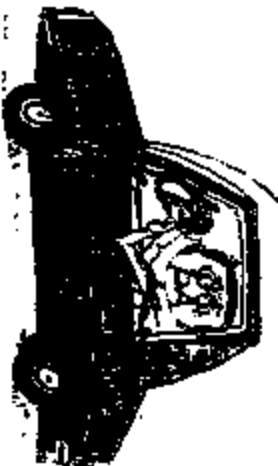
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



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