

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1375 Date Received: <u>05-DEC-2002</u> OFFICE DEFECTS INVESTIGATION Reference No. <u>8023771</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) <div style="background-color: black; width: 100%; height: 20px;"></div> CENTREVILLE OH			
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 In the absence of an address to the vehicle manufacturer, address to the vehicle manufacturer.			
Signature of Owner _____		Date <u>12/30/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) <u>1G2WP52K1XF207946</u>	Vehicle Make <u>PONTIAC</u>	Vehicle Model <u>GRAND PRIX</u>	Vehicle Year <u>1999</u>
Purchase Date <u>9-18-98</u>		Current Odometer Reading <u>52,550</u>	
Dealer's Name <u>BILL DeLORD</u> City <u>LEBANON</u> State <u>OH</u> Zip Code <u>45036</u>		Engine Size (CID/OCL) <u>3.8L</u> No. Cylinders <u>6</u> <input type="checkbox"/> Turbo Diesel Gas Fuel Injection <input checked="" type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used 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 checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>08810000</u>	Part Name(s) <u>EXHAUST SYSTEM:MANIFOLD:ENGINE</u>	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) <u>02-DEC-2002</u> Mileage at Failure(s) <u>52,452</u> 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 Damage		Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER HAD COOLANT LEAK AND TOOK TO DEALER WHO DIAGNOSED THAT PLASTIC INTAKE MANIFOLD HAD A CRACKED. DEALER REPLACED MANIFOLD ALONG WITH GASKET. TS ENCLOSED ARE COPIES OF MY REPAIR EXPENSES.			
CONTINUE ON BACK IF NEEDED			
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.			

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**