

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 368-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 151

Date Received

06-JUL-1999

 Od_or _____
 rt_dt _____
 od_rt _____
 up_lb _____

Reference No.

841648

OWNER INFORMATION (Type or Print)

537116

Work Number

Home Num

 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>(located at front of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	GMC	SONOMA	1993	

Purchase Date	Dealer's Name	Engine Size (Cyl/CC)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Fuel Injection

Transmission Type	Antilock Brakes	Restrain. System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<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 <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	Part Name(s)	Location	Failed Part(s)
3326600	All COMPONENTS Hydraulic Sump	<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
				<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				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

WHEN APPLYING BRAKES THE PEDAL WENT TO THE FLOOR, AND THE VEHICLE DID NOT STOP. DEALER COULD NOT DUPLICATE PROBLEM. *AK

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974 (Public Law 93-502) 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.

VEH. ID. 1GTCS14WXP0510121

Form Approved: OMB No. 2127-0008

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

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NO FEB 10 06 AM '99

OFFICE DEFECTS INVESTIGATION

Reference No.

841648

OWNER INFORMATION (Type or Print)

[Redacted Owner Information]

Work Number

Home Number

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 Identification No. [Redacted] Vehicle Make BUICK Vehicle Model SONOMA Vehicle Year 1993 Current Odometer Reading 63,000.

Purchase Date [Redacted] Dealer's Name HURD BUICK/GMC Engine Size (CID/CC/L) 4.3 Turbo Diesel Gas Fuel Injection No Cylinders 6
 New Used City HOUSTON State TX Zip Code 02919

Transmission Type Manual Automatic Antilock Brakes Yes No REAR Restraint System 3-Point Belt Driverside Airbag Passengerside Airbag Motorcyclist 3-Point Belt Cruise Control Yes No YES Drive Train Front Rear 4-Wheel Vehicle Type Car Van Minivan Other 2/D.R. Sport Utility Truck Motorcycle Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component -000000000 Part Name(s) ALL COMPONENTS Hydraulic Brakes Location Left Right Front Rear Failed Part(s) Original Replacement

No of Failures APP 6 Date(s) of Failure(s) FAST STOP Mileage at Failure(s) Followed by SLOW STOP Vehicle Speed at Failure(s) Failed Part(s) Available? Yes No NHTSA Previously Contacted? Yes No BY TEL.

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

SHIGHT Fire Yes No Number of Persons Injured 0 Number of Fatalities 0 Estimated Property Damage MIN. Reported to Police Yes No

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

WHEN APPLYING BRAKES THE PEDAL WENT TO THE FLOOR, AND THE VEHICLE DID NOT STOP. DEALER COULD NOT DUPLICATE PROBLEM. *AK

40 TO 50 MPH BKS WOULD SHOW VEH. COMP OFF BK & RE APPLY PEDAL WENT TO FLOOR - AFTER PUMPING VEH. WOULD STOP

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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.