



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 294

Data Received
06-DEC-1999

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.
853706

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>(Listed at front of windshield or drivers side)</small> 1G24X52K0WH209960	Vehicle Make PONTIAC	Vehicle Model BONNEVILLE	Vehicle Year 1998	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" 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"/> Sport Ult <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	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 _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06400000 08210000 08540000	Par. Name(s) FUEL:THROTTLE LINKAGES AND CONTROL ELECTRICAL SYSTEM:ALTERNATOR:GENERATOR ELECTRICAL SYSTEM:IGNITION:ELECTRONIC CONTROL UNIT	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures	Date(s) of Failure(s) 02-DEC-1999	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) 18		
	Vehicle Speed at Failure(s) _____		

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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

INTERMITTENTLY VEHICLE WILL SUDDENLY ACCELERATE OR STALL AND DIE. DEALER HAS REPLACED THE ALTERNATOR GENERATOR AND THE ECM. MANUFACTURER WILL BE NOTIFIED.*AK

CONTINUED ON BACK (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 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.



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00
JAN - 3 PM 2:06
06-DEC-1999
OFFICE
CIS INVESTIGATION
853706
Reference No.

FOR AGENCY USE ONLY 204

Qd or _____
rt at _____
od n _____
up tr _____

Home Number _____
Work Number _____

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

In the absence of an authorized representative, NHTSA will NOT provide your name and address to the vehicle manufacturer. _____
Signature of Owner _____
Date 12/28/99

Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) 1G24X52K0WH209960

Vehicle Make PONTIAC

Vehicle Model BONNEVILLE

Vehicle Year 1998

Current Odometer Reading 16000

Purchase Date 6/26/98

Dealers Name Ross Super Store

City Washington State WA Zip Code 07782

Engine Size (CID/CYL) V6 No Cylinders

Fuel Type Gas Diesel Turbo Fuel Injection

Transmission Type Automatic Manual

Antilock Brakes Yes No

Restraint System 3-Point Belt Motorized 2-Point Belt

Cruise Control Yes No

Drive Train Front Rear 4-Wheel

Vehicle Type Car Van Truck Sport UR Motorcycles Other

Body Style 2-Door 4-Door Stationwagon Pick Up Truck Other

Component 68400000 FUEL THROTTLE LINKAGES AND CONTROL

Component 08240000 ELECTRICAL SYSTEM:IGNITION:ELECTRONIC CONTROL UNIT

Part Name(s) Location

Failed Part(s) Failed Part(s)

Original Replacement

NHTSA Previously Contacted? Yes No

Failed Part(s) Available? Yes No

Date(s) of Failure(s) 02-DEC-1999

Mileage at Failure(s) 16000

Vehicle Speed at Failure(s) 85-85

No of Failures 30+

Crash Yes No

Five Yes No

Number of Persons Injured N/A

Number of Fatalities N/A

Estimated Property Damage N/A

Reported to Police 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)

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

INTERMITTENTLY VEHICLE WILL SUDDENLY ACCELERATE OR STALL AND DIE. DEALER HAS REPLACED THE ALTERNATOR GENERATOR AND THE ECM. MANUFACTURER WILL BE NOTIFIED. AK

Since August the car stalls out - sometimes accelerated. It is an intermittent problem that the dealership cannot correct. It has been in 4 times with the problem not corrected, please see letter enclosed.

CONTINUE ON BACK IF NEEDED

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[REDACTED]
December 27, 1999

General Motors Corp.
Pontiac Customer Assistance Center
Consumer Complaint Division
One Pontiac Plaza
Pontiac, MI 48340-2952

Dear Sir:

RE: File # [REDACTED] GMAC#042 298993043

On June 26, 1998, I leased a 1998 Bonneville SE 4DR Vehicle ID# 1G2HX52K0WH209960 at Rossi Super Store. In August 1999 the car started stalling intermittently. The check gauges light would come on bells would chime and all power would be lost. The car could be restarted. The car went in for service August 13, 1999 they replaced the generator to stop the problem. It still stalled intermittently.

The car went back to Rossi September 20, 1999 they could not reproduce the problem. It did occur with cold starts for me. Returned car to Rossi October 1, 1999 and they recalibrated the computer. When I picked the car up I insisted on a test run. It failed. They then kept the car till October 7, 1999 replacing w-Module 10494012 and crank shaft sensor assy. 1045616.

Now the car still stalls and accelerated intermittently. It is also hard to start. Returned car to Rossi November 12, 1999 and they had the problem occur and replaced the PCM/VCM Module 16236757. Picked up car November 29, 1999.

Then within a week the car stalled again in the middle of a busy intersection. I can not drive a car that can not be trusted. When it stalls you lose all power to the steering and brakes. That makes it unsafe to stop or steer. I use this car with children and grandchildren. I'm sure you don't want to put anyone in danger with this unsafe car. The car is at the Rossi Super Store since December 6, 1999. Since the problems have repeatedly not been correctable we are forced to request for the Lemon Laws to be acted on.

I look forward to your reply and a resolution to the problem. I will wait one week before seeking help from a consumer protection agency and the Better Business Bureau. I am forwarding a copy of this to the U.S. Department of Transportation. Please contact me at the above address or by phone at [REDACTED]

Sincerely,
[REDACTED]

Enclosures

cc: U.S. Dept of Transportation

cc: Rossi Super Store 30 RT. 31 Washington, NJ 07882 Attn; Bob Billello