

U.S. Department
of TransportationNational 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 197

Date Received

07-FEB-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

856432

 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 driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	PONTIAC TRUCK	TRANS SPORT	1997	

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 type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint 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"/> Motorbell <input checked="" 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 Ult <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 checked="" type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12111200 12111300	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT A INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT A	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
-----------------------------------	--	--	---

No. of Failures 0	Date(s) of Failure(s) 05-DEC-1999 Mileage at Failure(s) 36000 Vehicle Speed at Failure(s) 40	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 6	Number of Fatalities 0	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---	--------------------------------	---------------------------	---------------------------	---

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

WHILE DRIVING ABOUT 40 MPH CONSUMER'S VEHICLE CRASHED INTO ANOTHER VEHICLE THAT CROSSED THE LINE. DAMAGE WAS FROM THE FRONT TO DASHBOARD, AND THE AIR BAGS DID NOT DEPLOY. *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.

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 197	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print)		Date Received: 07-FEB-2000 OFFICE OF DEFECTS INVESTIGATION	Od_or _____ It_or _____ od_ft _____ up_ltr _____ Reference No. 856432
[Redacted] 588991		Work Number _____	Home Number [Redacted]
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 authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.			
Signature of Owner _____ Date _____			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
1GMDX03EXVD294166	MINIVAN PONTIAC TRUCK	TRANS SPORT	1997
Current Odometer Reading	Purchase Date		Dealer's Name
36,000	1/98		
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City <u>Salinas</u> State <u>CA</u> Zip Code _____		Engine Size (CID/CC/L) _____
Transmission Type		Antilock Brakes	Restraint System
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag
Cruise Control		Drive Train	Vehicle Type
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Sport Ut <input type="checkbox"/> Van <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____
Body Style		<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 _____	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
12111200 12111300	INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONTA INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONTA	<input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) <u>05-DEC-1999</u> Mileage at Failure(s) <u>35000</u> Vehicle Speed at Failure(s) <u>40</u>	Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" 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
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6	0
Estimated Property Damage		Reported to Police	
\$20,000/totalled auto		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING ABOUT 40 MPH CONSUMER'S VEHICLE CRASHED INTO ANOTHER VEHICLE THAT CROSSED THE LINE. DAMAGE WAS FROM THE FRONT TO DASHBOARD, AND THE AIR BAGS DID NOT DEPLOY. *AK <i>See attached description</i>			
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 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.			

**Complaint of failure of airbags non-deploy and GM
"customer service" neglect.**

February 17, 2000

Reference # 856432

(Accident happened December 5, 1999; approximately 6:15 PM) While driving at the speed limit of 55 mph on a highway, when a pickup truck pulled out in front of me (he was turning left from a road on my right). He pulled out, blocked the whole lane in front of me. I couldn't go in front of him because of oncoming traffic. By the time I hit the brakes and slowed up a bit, I was probably going 40+ mph on impact. I "T-boned" the pickup on the driver's side. See attached pictures. (Incidentally, the other driver has been arrested for driving with suspended license; no insurance; no vehicle registration and was deemed at fault for the accident.) My complaint is that not only did the airbags not deploy, but I had a terrible experience dealing with GM "customer service."

I hit the steering wheel and am still suffering with neck pain radiating down my right arm. My 17-year-old granddaughter is still receiving treatments for injury to neck, shoulder, and whiplash.

When I filed a claim with GM "customer service" regarding the airbags, I was in contact with Mr. Jonathon Posnick 1-800-762-2737, in Florida, (Claim #99311721). He told me that I could not settle with my insurance to replace my automobile until GM completed their investigation. He told me if I did settle for my auto, that they would halt the investigation. I waited six weeks for them to "investigate." After six weeks, I received a terse letter saying that the airbags "should not have deployed."

I called and asked Mr. Posnick for a copy of the report. He refused, saying "it's the property of GM." He said I would have to employ an attorney to subpoena the report. (I had no intention of litigation -- I just wanted to know why the airbags did not deploy, as that would have a bearing on what kind of automobile I purchased.)

This is hardly "customer service!" It seems that unless you end up paralyzed or dead, GM feels the airbags should not have deployed. Touting airbags the way GM does, certainly gives an automobile buyer a false sense of security.

I hope your organization can do something about this deplorable attitude and lack of concern/service by General Motors. I look forward to hearing from you.



Blaine Anderson - contact Ref # 286432

