

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

117

Date Received

01-MAY-2000

Od\_or \_\_\_\_\_

rt\_dt \_\_\_\_\_

od\_rt \_\_\_\_\_

up\_ltr \_\_\_\_\_

Reference No.

861186

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.) (located at front of windshield or driver's side) | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| 1G3HN54C4J1803900                                                           | OLDSMOBILE   | 88            | 1988         |                          |

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

|                                                                       |                                                                        |                                                                                                                                                                                                                                   |                                                                        |                                                                                                     |                                                                                                                                    |                                                                                                                                                                                                                                                                                                        |
|-----------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Transmission Type                                                     | Antilock Brakes                                                        | Restraint System                                                                                                                                                                                                                  | Cruise Control                                                         | Drive Train                                                                                         | Vehicle Type                                                                                                                       | Body Style                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Driverside Airbag<br><input type="checkbox"/> Passengerside Airbag<br><input type="checkbox"/> Motorcyclist<br><input checked="" type="checkbox"/> 2-Point Belt | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | <input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | <input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other | <input type="checkbox"/> Sport Vlt<br><input type="checkbox"/> Truck<br><input type="checkbox"/> Motorcycle<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other |

## FAILED COMPONENT(S)/PART(S) INFORMATION

|                                   |                                                                                              |                                                                                                                                                |                                                                                             |
|-----------------------------------|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br>01400000<br>03272000 | Part Name(s)<br>STEERING:GEAR:RACK AND PINION<br>BRAKES:HYDRAULIC:DISC:PADS AND SHOES        | Location<br><input type="checkbox"/> Left<br><input type="checkbox"/> Front<br><input type="checkbox"/> Right<br><input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No. of Failures                   | Date(s) of Failure(s) _____<br>Mileage at Failure(s) 93<br>Vehicle Speed at Failure(s) _____ | Failed Part(s) Available?<br>  Yes   No                                                                                                        | NHTSA Previously Contacted?<br>  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)

|                                                                              |                                                                             |                           |                      |                           |                                                                                           |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-------------------------------------------------------------------------------------------|
| Crash<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-------------------------------------------------------------------------------------------|

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

RACK & PINION STEERING WOULD LOCK UP IF VEHICLE S TOO LONG. THIS HAS HAPPENED WHEN THE WEATHER WAS COLD OR TOO HOT. ALSO, BRAKE PADS WORE OUT THE ROTORS. PADS WERE HARDER THAN THE ROTORS. HAD TAKEN VEHICLE TO DEALERSHIP SEVERAL TIMES FOR REPAIRS OF RACK & PINION STEERING, AND EACH TIME MECHANIC REFUSED TO REPAIR IT. \*AK

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.



U.S. Department  
of Transportation  
National 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 117

RECEIVED

00 JUN -5 AM 11:56

01-MAY-2000

OFFICE

DEFECTS INVESTIGATION

Od or \_\_\_\_\_  
rt dt \_\_\_\_\_  
od rt \_\_\_\_\_  
up tr \_\_\_\_\_

Reference No.

881186

## OWNER INFORMATION (Type or Print)

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 authorized signature, your name and address to the vehicle manufacturer.

Signature of Owner

Date 05/15/00

## VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1G3HN54C4J1803900  
Vehicle Make OLDSMOBILE  
Vehicle Model DELTA  
Vehicle Year 1988  
Current Odometer Reading 93,951.5

Purchase Date

17 JAN 88

Dealer's Name DOMINIC D LEE

Engine Size

(CID/CC/L) 3800

☐ Turbo☐ Diesel☐ Gas☒ Fuel Injection☒ New ☐ Used

City ELLISVILLE State MD Zip Code 63011

No Cylinders 6

Transmission Type ☐ Manual ☒ Automatic  
Antilock Brakes ☐ Yes ☒ No  
Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☒ 2-Point Belt ☐ Passengerside Airbag  
Cruise Control ☒ Yes ☐ No  
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel  
Vehicle Type ☒ Car ☐ Sport Ut ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other  
Body Style ☐ 2-Door ☒ 4-Door ☐ Station Wagon ☐ Pick Up Truck ☐ Other

## FAILED COMPONENT(S)/PART(S) INFORMATION

Component 01400000 03272000  
Part Name(s) STEERING:GEAR:RACK AND PINION  
BRAKES:HYDRAULIC:DISC:PADS AND SHOES  
Location ☐ Left ☐ Right ☐ Front ☐ Rear  
Failed Part(s) ☐ Original ☐ Replacement

No of Failures \_\_\_\_\_  
Date(s) of Failure(s) \_\_\_\_\_  
Mileage at Failure(s) 93  
Vehicle Speed at Failure(s) \_\_\_\_\_  
Failed Part(s) Available? ☐ Yes ☐ No  
NHTSA Previously Contacted? ☐ 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)

Crash ☐ Yes ☒ No  
Fire ☐ Yes ☒ No  
Number of Persons Injured \_\_\_\_\_  
Number of Fatalities \_\_\_\_\_  
Estimated Property Damage \_\_\_\_\_  
Reported to Police ☐ Yes ☒ No

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

RACK & PINION STEERING WOULD LOCK UP IF VEHICLE S TOO LONG. THIS HAS HAPPENED WHEN THE WEATHER WAS COLD OR HOT. ALSO, BRAKE PADS WORE OUT THE ROTORS. PADS WERE HARDER THAN THE ROTORS. HAD TAKEN VEHICLE TO DEALERSHIP SEVERAL TIMES FOR REPAIRS OF RACK & PINION STEERING, AND EACH TIME MECHANIC REFUSED TO REPAIR IT. \*AK

STEERING WHEEL CRACKED ON BOTH SIDES DUE TO STEERING LOCK UP. GAS GAGE HAS NOT WORKED IN YEARS. I WAS TOLD IT WOULD COST \$3000 MORE TO FIX IT. AIR CONDITIONER QUIT LAST WEEK. WILL COST ABOUT \$1000 TO CHANGE. FRESH. \*AK  
NEW COMPRESSOR. I WAS ALSO TOLD THE RADIATOR IS SHOT. THIS CAR HAS NEVER BEEN IN THE ROAD IN THE WINTER. IT DOES NOT HAVE RACED ON IT. NOW THAT THE CAR IS OLD GM WONT FIX ANYTHING. BUT THEY WOULDNT FIX IT WHEN IT WAS YOUNG.

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.

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.\*

D O T

MANUFACTURER/TIRE NAME

SIZE

\* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

THE BRAKE PADS WERE ON THE ROTOR'S AT 38,000<sup>MILES</sup>. I PAID TO HAVE NEW  
ROTOR & PADS PUT ON IT.

☆ U.S. G.P.O.: 1992 - 822-997 / 60098

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  
Auto Safety Hotline, NEF-11 HL  
400 7th Street, SW  
Washington, DC 20590

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

