

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 118

Date Received

23-MAY-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

862350

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 on driver's side)		Vehicle Make OLDSMOBILE TRU	Vehicle Model SILHOUETTE	Vehicle Year 1990	Current Odometer Reading
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbell ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Ult. Truck ☐ Motorcycle
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____					

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12240000	Part Name(s) INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT RETRACTORS	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE SEAT BELT ON THE DRIVER'S SIDE AND THE PASSENGER'S SIDE DOES NOT RETRACT. THE RETRACTOR MECHANISM ON THE PASSENGER'S SIDE WAS REPLACED ON FEB 5, 1999. THE VAN WAS TAKEN TO THE DEALERSHIP. THE SEAT BELTS HAS NOT BEEN REPAIRED. THE DRIVER'S SIDE SEAT BELT RETRACTOR HAS BEEN BROKE FOR OVER A YEAR. THE PASSENGER'S SIDE HAS BEEN BROKEN ABOUT 4 MONTHS. PLEASE PROVIDE ANY FURTHER INFORMATION.

CONTINUED ON BACK (11888)

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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Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) _____ (located at front of windshield on drivers side)	Vehicle Make OLDSMOBILE TRU	Vehicle Model SILHOUETTE	Vehicle Year 1990	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbell ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Ult ☐ Truck ☐ Motorcycle	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12240000	Part Name(s) INTERIOR SYSTEMS:ACTIVE RESTRAINTS:BELT RETRACTORS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

SEAT BELTS ON DRIVER'S SIDE AND PASSENGER'S SIDE DO NOT RETRACT. RETRACTOR MECHANISM ON THE PASSENGER'S SIDE WAS REPLACED ON FEB 5, 1999. VEHICLE WAS TAKEN TO THE DEALERSHIP. SEAT BELTS HAVE NOT BEEN REPAIRED. DRIVER'S SIDE SEAT BELT RETRACTOR HAS BEEN BROKEN FOR OVER A YEAR, AND PASSENGER'S SIDE RETRACTOR HAS BEEN BROKEN FOR ABOUT 4 MONTHS. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

CONTINUED ON BACK (11888)

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FOR AGENCY USE ONLY 118

Date Received

JUL -3 AM 10:10
23 MAY 2000OFFICE
DEFECTS INVESTIGATION

Od or
st dt
od rt
up fr

Reference No.

862350

OWNER INFORMATION (Type or Print)

610553

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an authorized signature, NHTSA will NOT provide your name and address to the vehicle manufacturer.

☒ YES ☐ NO

Signature of Owner

Date 6/12/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	OLDSMOBILE TR	SILHOUETTE	1990	143,200

Purchase Date 1/96	Dealer's Name ROCKCASTLE OLDS/CADILLAC (NOW JOSEPH)	Engine Size (CID/CC/L) 3.1	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection
☐ New ☒ Used	City FLORENCE State KY Zip Code 41042	No Cylinders 6	

Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☒ Yes ☒ No	Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☒ Minivan ☐ Other	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other (Van)
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12249000	Part Name(s) INTERIOR SYSTEMS: ACTIVE RESTRAINTS: BELT RETRACTORS	Location ☒ Left ☒ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures 3	Date(s) of Failure(s) 1- 5/99 Mileage at Failure(s) DON'T KNOW Vehicle Speed at Failure(s) 0	Failed Part(s) Available? ☒ Yes ☒ No SOME	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
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ACTUALLY, CORRECT ABOUT DRIVER SIDE, ON PASS SIDE, RETRACTOR DID NOT WORK, THEN REPLACED 2/99, NOW, AS OF 5/00, THE PASS SIDE WILL NOT PULL OUT. WARRANTY CAN BE GOOD FOR 12 MONTHS, 12,000 MILES. WILL COST ANOTHER 1000+ TO REPAIR WHAT SHOULD NOT HAVE BROKEN. DEALER REPAIR (LONNIE) SAID TO BRING IT IN & HE WOULD SEE IF IT COULD BE FIXED WITHOUT REPLACING. IF NECESSARY TO REPLACE, WILL CHARGE AGAIN.

CONTINUE ON BACK IF NEEDED

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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)

WE LOOKED UP THE SEATBELTS ON YOUR WEBSITE, AND FOR OLDSMOBILE COM-
PLAINTS, ABOUT 10+ % ARE SEAT BELT FAILURES. THIS IS A LEGALLY
REQUIRED PART AS WELL AS A LIFE SAVING FEATURE. WE CANNOT
AFFORD TO GET THEM FIXED THIS OFTEN. (ALSO, THE PROBLEM IS
APPARENT IN LUMINAS AND TRANSPORTS.) BUT WE CAN'T GET THEM
TO CHANGE THE 12MONTH/12K MILE "POLICY."

ADDITIONAL NOTE - FOR PAX SIDE, I WENT TO A SALVAGE YARD AND
GOT A SEATBELT MECHANISM. LO AND BEHOLD - IT DOES NOT
WORK, EITHER!! SAME PROBLEM.

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

