

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 294

Date Received

24-MAY-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

862459

 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>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G2WJ52M1TF201867	PONTIAC	GRAND PRIX	1996	

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 checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <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 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 type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12111200	Part Name(s) 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
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No. of Failures	Date(s) of Failure(s) 20-MAY-2000 Mileage at Failure(s) 61 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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)

WHILE GOING OVER A BUMP AT 12 MPH DRIVER'S AIRBAG DEPLOYED UNEXPECTEDLY. DELAER HAS BEEN NOTIFIED. *AK

CONTINUED ON BACK PLEASE

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 Vehicle Owner's Questionnaire (VOQ) NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 284 Date Received 00 JUN 20 PM 1:37 24-MAY-2000 OFFICE DEFECTS INVESTIGATION Reference No. 862459	
OWNER INFORMATION (Type or Print) [Redacted] 610808		Work No. [Redacted] Home No. [Redacted]	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of an [Redacted] name and address to the vehicle manufacturer? Signature of Owner [Redacted] Date 7/7/00		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) <small>(Located at bottom of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year
1G2WJ52M1TF201867	PONTIAC	GRAND PRIX	1996
Current Odometer Reading 6150		Purchase Date 1-98	
Dealer's Name EWING PONTIAC City DALLAS State TX Zip Code _____		Engine Size (CID/CC/L) 3.1 L No. Cylinders 6	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used		<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection	
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt		<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other		Body Style <input type="checkbox"/> Sport Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <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 12111200	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT & DRIVERS SIDE	Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) 20-MAY-2000 Mileage at Failure(s) 51500 Vehicle Speed at Failure(s) 12 MPH	Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 1	Number of Fatalities 0
Estimated Property Damage TO CAR OF \$3395 estimated		Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE GOING OVER A BUMP AT 12 MPH DRIVER'S AIRBAG DEPLOYED UNEXPECTEDLY. DELAER HAS BEEN NOTIFIED. *AK & PASSENGER AIRBAG AIR BAGS DEPLOYED ~10 SECONDS AFTER CAR HIT CURB			
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.			

05/21/2000 at 01:28 PM
64504

0146126020101018-01

GEICO
THE SENSIBLE ALTERNATIVE
FAX SUPPLEMENTS TO 972-236-3609 OR 972-701-1761
CELL PHONE# 972-672-5862
4201 SPRING VALLEY RD
DALLAS, TX 75244
(972)701-1777

*COPY OF
INSURANCE
ESTIMATE*

ESTIMATE OF RECORD

Written by: JAMES MATHERS # 05/21/2000 01:28 PM
Adjuster: A855 EXT: FCC: #

Insured: [REDACTED]
Owner: [REDACTED]
Address: [REDACTED]
Evening: [REDACTED]
Business: [REDACTED]

Claim #0146126020101018-01
Policy #58983960
Date of Loss: 05/20/2000 at 12:00 AM
Type of Loss: Collision
Point of Impact: 21. Undercarriage

Inspect RESIDENCE
Location:

OTHER

Repair
Facility:

10 Days to Repair
License #

1996 PONT GRAND PRIX SE 4-3.1L-FI 4D SED white Int:

VIN: 1G2MJ52M1TF201667 Lic: UCT81H TX Prod Date: Odometer: 61920

Air Conditioning	Tilt Wheel	Intermittent Wipers
Theft Deterrent/Alarm	Tinted Glass	Dual Mirrors
Clear Coat Paint	Power Steering	Power Brakes
Power Windows	Power Locks	Driver Airbag
Passenger Airbag	4 Wheel Disc Brakes	Cloth Seats
Split Bench Seats	Recline/lounge Seats	

NO.	QTY	DESCRIPTION	EXT.	PRICE	LABOR	PAINT
1		RESTRAINT SYSTEMS				
2	1	Repl Driver air bag		625.00	m	0.5
3		System diagnosis			m	0.5
4	1	Repl Clockspring w/elec acsry cont		140.00	m	1.0

ESTIMATE OF RECORD

1996 PONT GRAND PRIX SE 4-3.1L-FI 4D SED white Int:

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
5	Repl	RT Psngr air bag	1	625.00	m	1.0
6		FRONT SUSPENSION				
7	Repl	Susp crossmember	1	672.50	s	4.5
8		Adjust toe-in			m	0.9 H
9		Align four wheels			m	3.2 H
10*		O/H Sunroof assy				3.5
11		WINDSHIELD				
12	Repl	Glass GM, sedan w/o head-up di	1	678.30		3.0
13	Repl	RT Reveal molding side sedan	1	55.40		Incl.
14	Repl	LT Reveal molding side sedan	1	55.40		Incl.
15	Repl	Reveal molding lower-sedan	1	59.20		Incl.
16*		GLASS/INTERIOR CLEANUP	1			2.0
17		OTHER CHARGES				
18*		E.P.C.	1	2.50		

THIS IS THE ONLY damage to car related to impact w/ cur -
 Everything else is directly related to the premature deployment
 of the air bags which the insurance company is prepared to
 subrogate IF the car is fixed.

Subtotals => 2910.80 20.1 1.0

Parts 2910.80
 Body Labor 16.0 hrs @ \$ 32.00/hr 512.00
 Mechanical Labor 4.1 hrs @ \$ 54.00/hr 221.40
 Other Charges 2.50

SUBTOTAL \$ 3695.70
 Sales Tax \$ 2910.80 @ 8.2500% 240.14

TOTAL COST OF REPAIRS \$ 3935.84

ADJUSTMENTS:
 Deductible 500.00

TOTAL ADJUSTMENTS \$ 500.00
 NET COST OF REPAIRS \$ 3435.84

05/21/2000 at 01:28 PM
64504

0146126020101018-01

ESTIMATE OF RECORD
1996 PONT GRAND PRIX SE 6-3.1L-FI 4D SED white Int:

THIS IS NOT A NOTICE TO REPAIR

NO SUPPLEMENT WILL BE HONORED UNLESS AUTHORIZED BY GEICO DIRECT

NOTICE: NEW HIGH STRENGTH STEELS MAY REQUIRE THE USE OF A MIG WELDER FOR PROPER REPAIRS. NEW DESIGNS REQUIRE MEASUREMENT TO PROPERLY ALIGN THE VEHICLE. MAKE SURE YOUR SHOP HAS THE RIGHT EQUIPMENT TO REPAIR YOUR VEHICLE.

PLEASE FAX ALL SUPPLEMENT REQUESTS TO ME FOR APPROVAL

Estimate based on MOTOR CRASH ESTIMATING GUIDE. Non-asterisk(*) items are derived from the Guide
***** Database Date 3/2000. Double asterisk(**) items indicate parts supplied by a supplier
other than the original equipment manufacturer. Pound sign (#) items indicate manual entries.
CAPA items have been certified for fit and finish by the Certified Auto Parts Association. NAGS
Part Numbers, Prices and Labor Times are provided from National Auto Glass Specifications, Inc.

Pathways - A product of CCC Information Services Inc.

GEICO DIRECT

Memo

To: [REDACTED]
From: James P. Mathers Jr.
CC: File
Date: 05/24/2000
Re: Estimate of Damages

In Reference to claim # 0146126020101018-01

As you know, I recently examined your 1996 Pontiac Grand Prix for suspension and air bag related damage. I have placed this claim on hold until you give further instructions. However, you should know that Geico Direct is fully prepared to subrogate all airbag related damages. The suspension crossmember and wheel alignment obviously were not caused by the airbags. The remainder of the damage including the misaligned sunroof, windshield, airbag components, and dash are all directly related to the airbags and the secondary damage they caused. Please let me know if I can be of further assistance.

Thanks

James P. Mathers Jr.

Geico Direct