

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

01-JUN-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

862871

 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
1G2HS53L5T1292139	PONTIAC	BONNEVILLE	1993	

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 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 type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05150000	Part Name(s) ENGINE:OTHER PARTS	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
No. of Failures 0	Date(s) of Failure(s) 01-JUN-2000 Mileage at Failure(s) 46550 Vehicle Speed at Failure(s) 0	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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Fatalities 0	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)

ENGINE CYLINDER HEAD WAS LEAKING WITHOUT PRIOR WARNING. DEALER DID NOT EXPLAIN WHAT WAS CAUSE OF THE PROBLEM.*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.



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Vehicle Owner's Questionnaire (VOQ)

FOR AGENCY USE ONLY 197

Date RECEIVED: JUN 20 AM 11:00
 OFFICE: DEFECTS INVESTIGATION
 Reference No. 862871

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 authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date 6/14/00

VEHICLE INFORMATION

Vehicle Identification No. (VIN) 1G2H53L57P292139
 Vehicle Make PONTIAC
 Vehicle Model BONNEVILLE
 Vehicle Year 1993
 Current Odometer Reading 47280

Purchase Date 6-1-1993
 Dealer's Name DAVE CROSS MOTORS INC.
 City E.S. State MO. Zip Code 64086

Engine Size 3.8L (CID/CYL)
 No Cylinders 6
 Turbo Diesel Gas Fuel Injection

Transmission Type Automatic Manual
 Antilock Brakes Yes No
 Restraint System 3-Point Belt Motorbelt 2-Point Belt Driver's Side Airbag Passenger's Side Airbag

Cruise Control Yes No
 Drive Train Front Rear 4-Wheel
 Vehicle Type Car Minivan Other Truck Motorcycle Sport UK Van Truck Motorcycle Other
 Body Style 2-Door 4-Door Station Wagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06150000
 Part Name(s) ENGINE: OTHER PARTS
 Location Left Right Rear Front
 Failed Part(s) Original Replacement

No of Failures 0
 Date(s) of Failure(s) 10-MAY-2000
 Mileage at Failure(s) 46598
 Vehicle Speed at Failure(s) 0

Failed Part(s) Available? Yes No
 NHTSA Previously Contacted? No Yes

APPLICATION INCIDENT INFORMATION
 (Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(es) on the back of this form)

Crash Yes No
 Fire Yes No
 Number of Persons Injured 0
 Number of Failures 0
 Estimated Property Damage
 Reported to Police Yes No

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

ENGINE CYLINDER HEAD WAS LEAKING WITHOUT PRIOR WARNING. DEALER DID NOT EXPLAIN WHAT WAS CAUSE OF THE PROBLEM. AK
 LEAKING MASTER CYLINDER (BRAKE)

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.

CONTINUE ON BACK IF NEEDED



Washington, DC 20590

400 7th Street, SW

Information Management Staff NSA-10.01

National Highway Traffic Safety Administration

U.S. Department of Transportation

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

Penalty for Private Use \$300

Official Business

Washington, D.C. 20590

400 Seventh St. S.W.

National Highway

Traffic Safety

Administration

U.S. Department

of Transportation

NO POSTAGE
NECESSARY
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UNITED STATES

150 Years
of
America



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Series of horizontal lines for writing or marking.



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. *									
0	1								
* 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.									
MANUFACTURER/TIRE NAME									
SIZE									
NARRATIVE DESCRIPTION (CONTINUED)									



DAVE CROSS MOTORS INC.

1120 NORTH BLUE PARKWAY

LEE'S SUMMIT, MO 64086

Phone (816) 524-2233

Fax (816) 524-3670



BUICK



Oldsmobile

CUSTOMER NO. 7171	ADVISEE RICK	109	TAG NO. 317	INVOICE DATE 05/10/00	INVOICE NO. PNCS61715
LABOR RATE		MILEAGE 46,598		COLOR RED/	STOCK NO.
VEHICLE MAKE / MODEL 93/PONTIAC/BONNEVILLE/4DR SE SDN		DELIVERY DATE		DELIVERY MILES	
VEHICLE I.D. NO. 1G2HX53L5P1292139		SELLING DEALER NO.		TRUCK/IKUS DATE	
F.T.E. NO.		P.C. NO.		R.O. 05/10/00	
COMMENTS					

JOB# 1 CHARGES

LABOR
 J# 1 01PNZ3K 3000 MILE SERVICE TECH(S) 7.00
 CHANGE OIL AND FILTER, LUBE CHASSIS, AND PERFORM 14 POINT UNDER HOOD INSPECTION.

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
	1	25010792	OIL FLTR 1.836	7.00	7.00
				TOTAL - PARTS	7.00

G.O.G. & SUPPLIES					
5.0	5 QT ENGINE OIL	@	1.500 /UNIT		7.50
				TOTAL - GOG	7.50

MISC	CODE	DESCRIPTION	CONTROL NO.		
	S1	ENVIRONMENTAL FEE		1.00	
				TOTAL - MISC	1.00

JOB# 1 TOTALS

LABOR	9.45
PARTS	7.00
G.O.G.	7.50
MISC	1.00

JOB# 2 CHARGES

JOB# 1 JOURNAL PREFIX PNCS (JOB# 1 TOTAL) 24.95

LABOR
 J# 2 20PNZM1 MOTOR VEHICLE INSP TECH(S) 7.00
 PERFORM MOTOR VEHICLE INSPECTION

JOB# 2 TOTALS

LABOR	7.00
-------	------

JOB# 2 JOURNAL PREFIX PNCS (JOB# 2 TOTAL) 7.00

JOB# 3 CHARGES

LABOR
 J# 3+07PNZ BRAKES TECH(S) 97.50
 REPLACE LEAKING MASTER CYLINDER
 REPLACE MASTER CYLINDER

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE	
	1	25632708	CYLINDER 4.650	258.33	258.33
				TOTAL - PARTS	258.33

JOB# 3 TOTALS

LABOR	97.50
PARTS	258.33

JOB# 3 JOURNAL PREFIX PNCS (JOB# 3 TOTAL) 355.83

MISC	CODE	DESCRIPTION	CONTROL NO.	
JOB # A	SS	SHOP SUPPLIES		10.20

DISCLAIMER OF WARRANTIES
 The seller hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

Handwritten calculations:
 258.33 #3
 24.95 #1
 283.28
 2.00 #2
 290.28
 92.50 #3
 387.78
 10.20
 398.04
 11.70
 409.74
 20.40
 430.14
 Tax

IF YOU ARE HAPPY,
 LET YOUR NEIGHBOR KNOW!
 IF YOU ARE UNHAPPY,
 LET US KNOW!

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PONTIAC



DAVE CROSS MOTORS INC.

1120 NORTH BLUE PARKWAY

LEE'S SUMMIT, MO 64086

Phone (816) 524-2233

Fax (816) 524-3670



BUICK



Oldsmobile

CUSTOMER NO. 7171	ADVISOR RICK	109	TAB NO. 317	INVOICE DATE 05/10/00	INVOICE NO. PNC561715
[REDACTED]		LA EQUIP CAT [REDACTED]	MILEAGE 46,598	COLOR RED/	STOCK NO.
[REDACTED]		YEAR MAKE MODEL 93/PONTIAC/BONNEVILLE/4DR SE SDN	DELIVERY DATE	DELIVERY MILES	
[REDACTED]		VEHICLE ID NO. JG2HX53LSP1292139	SELLING DEALER NO.	PRODUCTION DATE	
[REDACTED]		F.T.E. NO.	P.O. NO.	R.O. 05/10/00	
COMMENTS					

TOTALS -----	TOTAL - MISC	10.26
<input type="checkbox"/> CHARGE	TOTAL LABOR....	113.95
<input type="checkbox"/> CREDIT CARD	TOTAL PARTS....	265.33
<input type="checkbox"/> CHECK #	TOTAL SUBLET....	0.00
<input type="checkbox"/> CASH	TOTAL G.O.G....	7.50
	TOTAL MISC CHG.	11.26
	TOTAL MISC DISC	0.00
	TOTAL TAX.....	20.41

TOTAL INVOICE \$ 418.45

THANK YOU FOR CHOOSING DAVE CROSS MOTORS FOR ALL OF YOUR CAR CARE NEEDS!!!!!! OUR SERVICE TEAM LOOKS FORWARD TO ALL OF YOUR FUTURE VISITS..

DAVE CROSS SERVICE DEPARTMENT

DISCLAIMER OF WARRANTIES

The seller hereby expressly disclaims all warranties, either expressed or implied, including any implied warranty of merchantability or fitness for a particular purpose, and neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

PAID

CUSTOMER SIGNATURE _____

**IF YOU ARE HAPPY,
LET YOUR NEIGHBOR KNOW!
IF YOU ARE UNHAPPY,
LET US KNOW!**

DAVE CROSS MOTORS INC. 1120 NORTH BLUE PARKWAY LEE'S SUMMIT, MO 64086