

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

125

Date Received

11-JUL-2000

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Reference No.

865172

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 vehicle or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G4HR54K5YU186233	BUICK	LESABRE	2000	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	☐ 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 ☐ Driver's Side Airbag ☐ Passenger's Side Airbag ☐ Motorized ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other ☐ Sport Utl ☐ Truck ☐ Motorcycle	Body Style ☐ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up Truck ☐ Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02000000	Part Name(s) SUSPENSION	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Dates 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)

WHILE DRIVING AT HIGHWAY SPEEDS VEHICLE SEVERLEY PULLS TO THE RIGHT OR THE LEFT
 CAUSE UNKNOWN. DEALER CAN NOT IDENTIFY THE PROBLEM. PLEASE GIVE ANY FURTHER
 DETAILS.*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.

 DOT Auto Safety Hotline 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		FOR AGENCY USE ONLY 125 Date Received 11 JUL 2000 Office DEFECTS INVESTIGATION Reference No. 865172 Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] 619738				Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer. ☒ YES ☐ NO Signature of Owner [Redacted] Date 7/29/00	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1G4HR54K5YU186233		Vehicle Make BUICK		Vehicle Model LESABRE	
Vehicle Year 2000		Current Odometer Reading 10978			
Purchase Date 11-02-99 ☒ New ☒ Used		Dealer's Name JERRY BOILING MOTORS City MALEBAY State EA Zip Code 50677		Engine Size (CID/CC/L) 3800 No Cylinders 6 ☐ Turbo ☒ Diesel ☒ Gas ☒ Fuel Injection	
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 UIC ☐ Van ☐ Truck ☐ Motorcycle ☐ Minivan ☐ Other	
Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other		FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 02000000		Part Name(s) SUSPENSION		Location ☐ Left ☐ Right ☐ Front ☐ Rear	
No of Failures 4-8		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 0	
Number of Fatalities 0		Estimated Property Damage 0		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) WHILE DRIVING AT HIGHWAY SPEEDS VEHICLE SEVERLEY PULLS TO THE RIGHT OR THE LEFT CAUSE UNKNOWN. DEALER CAN NOT IDENTIFY THE PROBLEM. PLEASE GIVE ANY FURTHER DETAILS. *AK ① FRONT END ^{LEAK} ALIGNED & TIRES ROTATED - NO IMPROVEMENT. ② FRONT & REAR ALIGNED - BODY LOWERED - NO IMPROVEMENT 4-8 7-27- DEALER CONTACTED - SAID THEY DON'T KNOW HOW TO FIX IT.					
CONTINUE ON BACK IF NEEDED					
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