Form Approved: O.M.B. No. 2127-0042

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 335

Date Received: 03-NOV-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No.: 874353

[redacted]

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 bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G8ZK8276TZ299188	SATURN	SW2	1996	

Purchase Date: ☐ New ☒ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) _____
No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
06130000 08300000	**FUEL:FUEL LINES FITTINGS AND PUMP** **ELECTRICAL SYSTEM:WIRING**	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures

Date(s) of Failure(s) 29-OCT-2000
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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

WHILE DRIVING AT 35 MPH GAS LINE UNDER REAR SEAT BLEW UP, TOOK TO DEALER AND THEY REPLACED CABLES AND GAS LINE. *AK

CONTINUED ON BACK IF NEEDED

Form Approved: O.M.B. No. 2127-0042

U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

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FOR AGENCY USE ONLY 335

Date Received: 03-NOV-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No.: 874353

[redacted]

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 bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G8ZK8276TZ299188	SATURN	SW2	1996	

Purchase Date: ☐ New ☒ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) _____
No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
06130000 08300000	**FUEL:FUEL LINES FITTINGS AND PUMP** **ELECTRICAL SYSTEM:WIRING**	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures

Date(s) of Failure(s) 29-OCT-2000
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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

WHILE DRIVING AT 35 MPH GAS LINE UNDER REAR SEAT BLEW UP, TOOK TO DEALER AND THEY REPLACED CABLES AND GAS LINE. *AK

CONTINUED ON BACK IF NEEDED

Form Approved: O.M.B No. 2127-0008

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 335

Date Received: 03-NOV-2000

Od_or
rt_dt
od_rt
up_ltr

Reference No. 874363

OWNER INFORMATION (Type or Print)

[redacted] 663339

Work Number
Home Nu [redacted]

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 Ow [redacted] Date 11/18/2000

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G8ZK8276TZ299188	SATURN	SW2	1996	64239

Purchase Date: 3-1996 ☐ New ☒ Used
Dealer's Name: Saturn of Renton
City: Renton State: Wa Zip Code: 98055
Engine Size (CID/CC/L): ____ No Cylinders: ____
☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
08130000 08300000	FUEL:FUEL LINES FITTINGS AND PUMP ELECTRICAL SYSTEM:WIRING	☒ Left ☐ Right ☐ Front ☒ Rear	☐ Original ☒ Replacement

No of Failures
Date(s) of Failure(s): 29-OCT-2000
Mileage at Failure(s): 63725
Vehicle Speed at Failure(s): 35 mph
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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

WHILE DRIVING AT 35 MPH GAS LINE UNDER REAR SEAT BLEW UP, TOOK TO DEALER AND THEY REPLACED CABLES AND GAS LINE. *AK

CONTINUE ON BACK IF NEEDED

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)

(1) Saturn of Renton first said it was due to driving on gravel Road.

(2) Then said I (the driver) hit a stick or log.

(3) Then said I (the driver) hit a flying piece of metal. I did not hit any thing. I checked the steet and found nothing to hit on a paved Two lane road.

(4) Then said as I was walking out of the Show room to pick up my car, and was 20 to 30 feet away from speaking Person "Ruth, when you drive out of the lot, steer to the left as you don't hit any thing."

When is Saturn going to admit they sold me a faulty fuel line?

(5) The explosion had about the same power as a "M80" Firecracker. Saturn said there was a dent under the car.

☆ U.S. G.P.O.: 1992 – 623-857 / 60096

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

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

SATURN

SATURN OF RENTON

555 S.W. Grady Way
Renton, WA 98055
(425) 277-5856

Sold To:

[redacted]

Service Order Number	Service Advisor	VIN
3048378	ROBERT SCHLORER	1G8ZK8276TZ2

Color	Year	Make Model	License	Engine
GOLD	1996	SATURN SW2 WAGON	387GYG	LL0 1.9LL4

Mileage In Out	Tag	Delivery Date	Rate	Doc. Count
63725 / 63726	3014	3/18/1996		1

Tax Exempt	Date Time In	Date Time O
	10/30/2000 7:29	10/31/2000 15

LINE 1 CUSTOMER STATES THAT THERE IS A FUEL LEK UNDER THE VEHICLE BELOW DRIVERS SEAT.
TECH COMM: INSPECTED AND FOUND FUEL LINE CUT BY CONTACT WITH FOREIGN OBJECT. REMOVED AND REPLACED DAMAGED FUEL LINE AND RECHECKED OK.

REPAIR 1 PIPES, FUEL AND EVAPORATIVE EMISSION CONTROL - REP
OPCODE: L0140 SALE TYPE: CASH - GM $1
HRS: 1.70
PRIMARY TECH: GREGORY HAHN

PARTS		DESC	FP	QTY	PRICE	SALE TYPE	
SN	21007581	PIPE ASM-	N	1	100.060	CASH - GM	$1

LINE TOTAL $2

LINE 2 CUSTOMER STATES THAT THE FUEL FILLER DOOR WILL NOT STAY SHUT.
TECH COMM: INSPECTED AND FOUND CONTACT WITH FOREIGN OBJECT HAD BENT FUEL FILLER DOOR RELEASE CABLE, SEIZING CABLE. REMOVED AND REPLACED CABLE, RECHECKED OK.

REPAIR 1 CABLE ASSEMBLY, MANUAL FUEL FILLER DOOR LOCK RELEA
OPCODE: R4085 SALE TYPE: CASH - GM $1
HRS: 2.80
PRIMARY TECH: GREGORY HAHN.

PARTS		DESC	FP	QTY	PRICE	SALE TYPE	
SN	21098687	LATCH ASM	N	1	20.090	CASH - GM	$

LINE TOTAL $2

SATURDAY SERVICE 8:00 AM TO 3:30 PM

Disclaimer of Warranties

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

SATURN OF RENTON

555 S.W. Grady Way
Renton, WA 98055
(425) 277-5656

SERVICE INVOICE

Co.# 0

Sold To:	Service Order Number	Service Advisor	VIN
[redacted]	3048376	ROBERT SCHLORER	1G8ZK8276TZ299186

Tag	Door Count	Date/Time In	Date/Time Out
3014	1	10/30/2000 7:29	10/31/2000 16:46

LABOR	$306.00
PARTS	$120.15
MISC MATERIALS	$5.00
TAX (Washington Stat)	$37.08
CUSTOMER TOTAL	$468.23
PAYMENT (BALANCE DUE)	$468.23

CUSTOMER SIGNATURE _____

NOV 1 PAID

Disclaimer of Warranties

Johnny's Cedar Rapids Towing

30081

18015 S.E. Maple Valley Hwy.
Renton, WA 98058
PHONE 255-5295

24 hour 

Date 10 29 00 WDL #

WO # PO #

Bill to: [redacted]

Addres

City, St

Owner:

Addres

YR 96	MAKE Sentra	MODEL SE-R	LIC # 357 GXC
VIN #			ODOMETER

DRIVER 108	TRUCK 11	CLASS A	WSP ☐ ACC ☐ IMP ☐ INS ☐ PD ☐ PX ☐ COM ☐

Tow From						
Tow To						20
Extra Services	Dolly	Wheel Lift	Driveline Removal	Car Carrier	Standby	46
Winching						
2nd Tow			Driver	Truck	Class	
Storage	Inside Days Outside @			Per Day		
Mileage Finish			Time Finish			
Mileage Start			Time Start			00
Total Miles 3	@	Per Mile	Total Time			2.4
After Hours Release			Keys			
Comments			Advance Charges			
			Tolls Paid			5
			Sub Total			76
			Sales Tax			6 85
Check No.		Bank Card ☐	TOTAL			77 35
Date Release		Cash ☐				
Released By		Charge ☐				

AUTHORIZATION TO TOW VEHICLE X [redacted]

This Agreement is between you and an independent licensee of Dollar Rent A Car Systems, Inc. unless otherwise noted.

LICENSEE

PORTLAND INT'L AIRPORT (PDX)
IN TERMINAL (503) 249-4752

PORTLAND DOWNTOWN (PDW)
132 N.W. BROADWAY (503) 228-3540

SEATTLE, WA FAX NO. (206) 431-7699
PORTLAND, OR FAX NO. (503) 282-0229

SEATAC INT'L AIRPORT (SEA)
IN TERMINAL (206) 433-5825

SEATAC OFF AIRPORT (PAC)
17900 INT'L BLVD.
SEATTLE, WA 98188 (206) 433-0777

LYNNWOOD / EDMONDS (LYN)
17320 HWY. 99, STE. "A" (425) 787-6686

BELLEVUE EASTSIDE (BVU)
1420 130TH AVE. N.E. (425) 453-9770

SEATTLE DOWNTOWN (DWN)
BOREN & STEWART (206) 682-1318

DOLLAR RENT A

CUSTOMER INFORMATION

[redacted] FDN# A [redacted]

FARRER[redacted] WA 05/28/63 05/28/36 4254322166
KINGS COMMAND FOODS 4252516708

ADD'L RENTER: NONE AUTHORIZED

LOCAL

Car To Be Returned To	Rental Expires On	Rental Agreement
WAP SEA	11/01/00 AT 1728	01491257

Vehicle Information

	REPLACED	CURRENT
OWNING CITY:		WA
VEHICLE#:		01643
LICENSE #:		776 KUY
MODEL:		SUBA LEGR 4DR S
REG RATE: SPL		XXXX
SPL RATE:		
OUT FUEL LE:		8/8 Full
IN FUEL LEV:		/8 Full
MILES IN:		14895
MILES OUT:		14813
MILES DRIVEN:		82
MILES FREE:		

	ACCEPTS	DECLINES
LDW	_____	XXXXXXXXX
PAI/PEP	XXXXXXXXX	_____
SLI	XXXXXXXXX	_____

WRITTEN 10/29/00 RE C OUT WAP SEA
CLOSED 11/01/00 IN WAP SEA
T.A. #: REZ #: UPG Y/N: N
SOURCE: LES

VI 4417124125232410 06/30/01

10/29/00 029785 250.00 TRX#00681

TIME OUT	TIME IN
10/29/00 1728	11/01/00 1655

REG MILE:	mil @		
REG HOUR: 18	hrs @	15.00	29.95
REG DAYS: 2	day @	29.95	59.90
REG WEEK:	per @	169.95	
SPL MILE:	mil @		
SPL HOUR:	hrs @		
SPL DAYS:	day @		
SPL WEEK:	per @		
TOTAL T&M			89.85
18.99x 3 LDW			56.97
CONCESSION FEE RECOVERY CHARGE 11.1%			9.97
TAXABLE $			156.79
Tax 18.38%			28.69
Refuel. 4.06/gal			
Damage Deposit:			
Gas/Oil Credit:			
SUBTOTAL			185.48
LESS DEPOSIT			
NET TOTAL:			185.48

You agree not to drive the vehicle outside the states of Washington or Oregon without our written permission. If vehicle is driven outside Washington or Oregon without our written permission all benefits afforded under LDW/PLDW/SLI are voided and the rate reverts to 100 free miles per day, with excess at $.80 per mile.

X _____ RENTER INITIALS

X _____ RENTER SIGNATURE

X _____ ADDITIONAL RENTER SIGNATURE

CHARGES BASED ON 24 HOUR DAY FROM

MFG. By KAYE SMITH BUSINESS GRAPHICS (425) 228-8900 (1-800-422-9497)