 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 125</p>	
	<p>Date Received</p> <p>09-JAN-2001</p>		<p>Od_or _____ rt_dt _____ od_rt _____ up_ltr _____</p>	
<p>OWNER INFORMATION (Type or Print)</p>			<p>Reference No.</p> <p>877720</p>	
<p>665467</p>		<p>Work Number _____ Home Number _____</p>		
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.</p>				
<p>Signature of Owner _____</p>			<p>Date _____</p>	

VEHICLE INFORMATION				
Vehicle Ident. No. (VIN.) (Located at bottom of windshield or driver's side)	Vehicle Mak	Vehicle Model	Vehicle Year	Current Odometer Reading
	BUICK	REGAL	1998	
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 Injectio
<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
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type		Body Style		
<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 <input type="checkbox"/> Truck		

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
03Z71000	BRAKES:HYDRAULIC:DISC:CALIPER	<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)		

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 Damag	Reported to Polic
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

WHEN APPLYING BRAKES BRAKE CALIPER JAMMED AND FELL OFF, CAUSING FRONT WHEEL TO FREEZE, RESULTING IN LOSS OF CONTROL. 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.



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 125

Date Received

RECEIVED
09-JAN-2001

Od_or
rt_dt
od_rt
up_itr

Reference No.

877720

OWNER INFORMATION (Type or Print)

665467

OFFICE
RECEIVED INVESTIGATION

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

to the vehicle manufacturer.

Signature of Owner

Date 1/22/01

Vehicle Ident. No. (VIN.) <small>(Located at bottom of windshield on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2G4WF5218W1442948	BUICK	REGAL	1998	48990

Purchase Date 1/31/98	Dealer's Name Cavender Buick	Engine Size (CID/GDL) 3.8	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used	City San Antonio State TX Zip Code 78212	No Cylinders 6	

Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	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 <input type="checkbox"/> Sport Util <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <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
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03271000	Part Name(s) BRAKES:HYDRAULIC:DISC:CALIPER	Location <input 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 1	Date(s) of Failure(s) 12/25/00	Mileage at Failure(s)	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 checked="" 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 0	Number of Fatalities 0	Estimated Property Damage 0	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---	--------------------------------	---------------------------	--------------------------------	---

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

WHEN APPLYING BRAKES, BRAKE CALIPER ^{JAMMING} ~~JAMMED~~ AND FELL OFF, CAUSING FRONT WHEEL CAUSING TO FREEZE, RESULTING IN LOSS OF CONTROL. PLEASE GIVE ANY FURTHER DETAILS. *AK

SEE ATTACHED FOR FURTHER DETAILS; 3 ATTACHMENTS INCLUDED.

ODI ID # 739058

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.

[REDACTED]

January 03, 2001

To: Mr. G. Richard Wagoner, CEO/COO
GENERAL MOTORS Corp.
300 Renaissance Center
Detroit, MI 48265

Ref: 1998 Buick Regal/SMART BUY
VIN 2G4WF5218W1442948

Dear Mr. Wagoner,

I am writing to report a serious problem I had with my auto as I was driving to San Antonio from Corpus Christi Texas on Christmas Day. I had an uneventful drive, and normally enjoy driving, in the comfort of this car. I had to be extra careful as the weather was cold and the roads were wet and slick. Interstate 37 was no exception. I did fine on the drive until I arrived at the San Antonio Loop 410. This was my exit. I stepped on the brake to slow the vehicle down for the exit and as soon as I released the brake pedal we heard a loud rotating clunk. I thought the right front wheel was going to come off. I continued to slow and as soon as I reached the shoulder, immediately off the exit, the car froze to a sudden, locked, halt. The car would drive in reverse but the right front wheel would stay locked frozen when shifted to forward drive. It would not budge. After an immediate inspection I thought a brake pad or rotor was the problem which turned out to be a close guess. This was at 1630 local time. I spent the rest of Christmas Day waiting for a tow vehicle. The car was taken to CAVENDER OLDSMOBILE as it was the nearest GM Dealership. We arrived there at 0030 December 26th. So much for Christmas Day Evening.

During the day the service department finished troubleshooting the problem. Two bolts that hold the caliper, on the right front wheel, sheared off. The caliper, after coming off, came to a position that jammed the right front wheel movement to a solid halt. No forward movement, at all, from that wheel.

The last service to those brakes were at the dealership where I made the SMART BUY; CAVENDER BUICK. Although the owners are related these are two totally different dealerships at different locations in San Antonio. Was the servicing the problem? Is there a flaw in the design?

You know; I complain about Christmas Day but the fact of the matter is that my wife and I are really quite happy to be here; to be able to tell you about what happened to us. I really can picture the possibilities as the calipers come off and jam the wheel at 70mph on wet pavement on a cold day.

The only question I keep hearing is "Will you be returning the SMART BUY or keeping it at maturity?" No one seems concerned at the implications of parts coming off during normal vehicle operation. Thus, this letter to you. I could just go on with business as normal as far as the SMART BUY contract goes. What would I do if in the news, one night, I hear about a fatal accident involving a BUICK and "brake failure".

Maybe you can give me an idea. I hope to hear from you or your designated representative. Thank You

[REDACTED]

GM Customer

cc: Mr. Bobby Cavender, CAVENDER BUICK

*THIS LETTER ALREADY SENT TO GM; GM REPRESENTATIVE MS. EMMA MANN
ASSIGNED THIS INCIDENT A FILE NUMBER. THE FILE NUMBER IS
02726832.*

CAVENDER



BUICK

4515 San Pedro
San Antonio, Texas 78212
(210) 734-4221

11911 IH-10 West
San Antonio, Texas 78230
(210) 690-0900

SERVICE DEPT. HOURS: MONDAY - FRIDAY 7:00 A.M. TO 6:00 P.M.

CUSTOMER NO. 11976	SERVICE CONSULTANT JAMES N BERTHOLD 108	TAG NO. 7606	INVOICE DATE 06/23/99	INVOICE NO. BUCS125968
	651HRK	22583	BLACK/GRAY	STOCK # 20609
	YEAR / MAKE / MODEL 99/BUICK/REGAL GS/4DR		DELIVERY DATE 02/02/98	DELIVERY MILES 8
	VEHICLE I.D. NO. 2G4WF5218W1442948		SELLING DEALER NO.	PRODUCTION DATE
	F.T.E. NO.	P.O. NO.	R.O. DATE 06/22/99	
COMMENTS MO: 22588				

LABOR & PARTS
J# 1 45BUZ SUSPENSION AND STRG. HOURS: 3.20 TECH(S): 175
 CHECK VEHICLE SHUDDERS/SHAKES WHEN BACKING AND TURNING
 POWER STEERING GEAR LEAKING
 REPLACED POWER STEERING GEAR, SET TOE IN
 WARRANTY

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	26063582	REM S7/GR 6.508	
JOB # 1	1	26063582	CORE RETURN	
JOB # 1	1	3050017	P/S FLD	

JOB # 1 TOTAL PARTS 0.00
 JOB # 1 TOTAL LABOR & PARTS 0.00

J# 2 40BUZPURSATE BRAKES, PULSATE HOURS: 1.20 TECH(S): 175
 CHECK BRAKES PULSATE ON APPLICATION
 FRONT BRAKE ROTORS HAVE EXCESS RUNOUT
 REFACED BOTH FRONT BRAKE ROTORS
 WARRANTY

PARTS	QTY	FP NUMBER	DESCRIPTION	UNIT PRICE
JOB # 2 TOTAL PARTS 0.00				
JOB # 2 TOTAL LABOR & PARTS 0.00				

TECHNICIAN CERTIFICATION
 175 JUAN J SOTO TECH RED GROUP

TOTALS

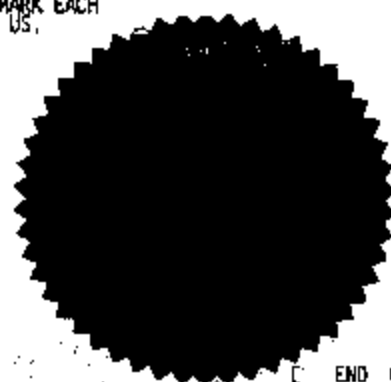
TOTAL LABOR	0.00
TOTAL PARTS	0.00
TOTAL SUBLET	0.00
TOTAL G.O.G.	0.00
TOTAL MISC CHG	0.00
TOTAL MISC DISC	0.00
TOTAL TAX	0.00
TOTAL INVOICE \$	0.00

 * [] CASH [] CHECK CH NO [] MASTERCARD [] AMEX EXPR *
 * [] CHARGE [] DISCOVER [] MASTERCARD [] AMEX EXPR *
 * [] INSURANCE TYPE CLAIM # *****

 SHOULD YOU HAVE ANY QUESTIONS ABOUT THE SERVICES YOU RECEIVE
 OR ABOUT YOUR INVOICE, PLEASE CONTACT ANY OF THE FOLLOWING
 PERSONNEL WHO ARE SERVICE CONSULTANTS: JAMES BERTHOLD, BILL
 STAKES OR DAVID ARCE. WE WILL ANSWER ALL OF YOUR QUESTIONS.

YOU MAY SOON BE RECEIVING A SURVEY FROM BUICK. PLEASE
 COMPLETE AND RETURN IT. IF YOU ARE UNABLE TO MARK EACH
 QUESTION "COMPLETELY SATISFIED" PLEASE CONTACT US.

CUSTOMER SIGNATURE



PAGE 1 OF 1 CUSTOMER COPY [END OF INVOICE]

STATEMENT OF DISCLAIMER
 The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Buick hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor warrants any other person is liable for any liability in connection with the sale of this item/items. Payable in Bexar County, Texas.

AUTHORIZATION TO REPAIR
 I hereby authorize the below repair work to be done along with necessary material, and hereby grant you and/or your employees permission to operate the car or truck herein described or herein described or otherwise, where for the purpose of testing and/or inspection. An express mechanic's lien is hereby given on this vehicle. I realize the vehicle may be repossessed if any check given is not paid.
 Receipt from the undersigned the vehicle described on this order acknowledgment for repair or alteration is hereby acknowledged by dealer. Said customer or hereby notified that the said property is not insured or protected to the amount of the actual cash value thereof, or otherwise, by the undersigned dealer against loss occasioned by theft, fire or vandalism while the property remains with the dealer. Customer agrees no claims of personal property have been left in the vehicle, and dealer is not responsible for inspection thereon.

X CUSTOMER SIGNATURE

Notice Pursuant to §70.001
 Texas Property Code
 I am the person or agent who is authorized by the person who is obligated to pay for the repair of the motor vehicle subject to the repair order. I understand that the vehicle is subject to repossession in accordance with §4-503, Texas Business and Commercial Code, if a written order for payment for repair on the vehicle is stopped, dishonored because of insufficient funds, no funds, or because the drawer or maker of the order has no account or the account on which it is drawn has been closed.

X Signature of Person Responsible for Payment of Person Residing in

COURTESY TRANSPORTATION
 RENT CAR YES NO
 SHUTTLE YES NO
 12:29:05
 ONE WAY TWO WAY

Cavender Olds

confidence



CAVENDER OLDSMOBILE COMPANY
5772 N.W. LOOP 410
SAN ANTONIO, TEXAS 78238



MAIN SWITCHBOARD (210) 681-3399
SERVICE DIRECT LINE (210) 681-3377
PARTS DIRECT LINE (210) 681-3355

I ACKNOWLEDGE RECEIPT OF
THE PARTS AND LABOR
LISTED BELOW

DISCLAIMER OF WARRANTIES
THE SELLER HEREBY DISCLAIMS ALL WARRANTIES, EITHER EXPRESSED OR
IMPLIED INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR
FITNESS FOR A PARTICULAR PURPOSE AND NEITHER ASSUMES NOR
AUTHORIZED ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN
CONNECTION WITH THE SALE OF PARTS.



THIS FORM PRINTED ON PREMIUM CARBONLESS PAPER

FOR OFFICE USE: TAX# 4137 ADV# 417 RSTW. W INVOICE# 00101001 VIN 2G4W01401422948 LICENSE NUMBER: TX DS18AK
DATE RUL# 00000 INVOICER# 12/22/00 12 2000
MILEAGE IN: 40230
PARTS BARR# 12/26/00 DUNE# 12/27/00

CONCERN #1	RE FRT WHEEL LOCK UP REPORT	OPERATION	FROM	AMOUNT
CORRECTION	REMOVE STAFF FROM WHEEL AND INSPECT. ADJUST BY USING WHEEL LOCK	40	385	66.00
COMMENT	BT CALIPER MOUNT - WITH RIGHT WHEEL. USE LOW PRESSURE. 1.000 NIT			
	PART NUMBER	QTY	UNIT	
	680 010025539	10	19.76	19.76
FACTORY	TECH# 385 - SANTONASTASO, J			
		SUBTOTAL		
		PARTS		19.76
		LAB-MECHANICAL		66.00
		TOTAL CHARGE		85.76
		GRAND TOTAL		

SUMMARY OF CHARGES FOR INVOICE 002936		PAYMENT DISTRIBUTION FOR INVOICE 002936	
PARTS	19.76	TOTAL CHARGE	87.32
LAB-MECHANICAL	66.00		
TOTAL	85.76		
TAX	1.56		
TOTAL CHARGE	87.32		

IF YOU HAVE ANY QUESTIONS - PLEASE SEE WELBY W. RISTOW
ASK ABOUT GOODWRENCH SERVICE PLUS LIFETIME
LIMITED WARRANTY ON CERTAIN GM PARTS

PAGE 1
1/85 C 2493

Bill N/C

TO RESORDER FORMS OR SUPPLIES CALL 1-800-984-6249 EXT. 6580

January 25, 2001

COPY

Re: General Motors Corporation S0101-0217 404B LKP

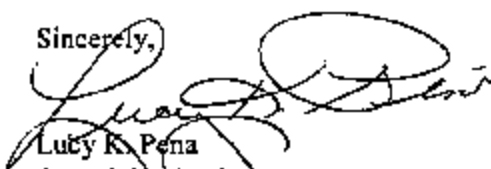
Dear Mr. [REDACTED]

We have received your inquiry regarding the above-named party.

We noted in your letter that you have also contacted the agency listed below. This is the agency which can best assist you. Therefore, we respectfully suggest that you address further inquiries to them.

Thank you for contacting the Attorney General's Office.

Sincerely,



Lucy K. Pena
Complaint Analyst
Consumer Protection Division
San Antonio Regional Office

National Highway Traffic Safety Commissi
Department of Transportation
Washington, DC 20590

RECEIVED
JAN 25 2001 11
OFFICE OF THE ATTORNEY GENERAL
SAN ANTONIO REGIONAL OFFICE

1/23/11

SO101-0217

Dear Sir,

Here are the documents to add to the
electronic file if created and sent to your
office on 1/23/11.

Thank you



01 JAN 24 PM 4:55