


| DOT Auto Safety Hotline | | FOR AGENCY USE ONLY 160 | |
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|  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 | |
| OWNER INFORMATION (Type or Print) [Redacted] | | Date Received 18-JAN-2001 | Od or rt_dt _____ od_rt _____ up_itr _____ |
| Signature of Owner _____ | | Reference No. 878450 | |
| Work Number _____ | | Home Number _____ | |
| 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. | | | |
| VEHICLE INFORMATION | | | |
| Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) | Vehicle Mak OLDSMOBILE | Vehicle Model CUTLASS SUPREM | Vehicle Year 1990 |
| Current Odometer Reading | Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | | |
| Dealer's Name _____ | | Engine Siz (CID/CC/L) _____ | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio |
| City _____ State _____ Zip Code _____ | | No Cylinders _____ | |
| Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic | Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Restraint System <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 Be | Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other | <input type="checkbox"/> Sport UT <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle | Body Style <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 06017000 | Part Name(s) FUEL:LPG PANEL:DASHBOARD CONTROL | Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear | Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failures | Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____ | Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously <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 | Number of Fatalite |
| Estimated Property Damag | | Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) DIGITAL DASH IS ACTING ERRACTIC ,IT WILL FLASH ON AND AND OFF, DOES NOT INDICATE CORRECT SPEED OR CORRECT MILEAGE. | | | |
| 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. | | | |