



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 758

Date Received

16-MAR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

883255

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) (Location at bottom of windshield and driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1G3NL52TXVM310996	OLDSMOBILE	ACHIEVA	1997	
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type	Body Style			
☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06420000	Part Name(s) FUEL:THROTTLE LINKAGES:ACCELERATOR:RIGID	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 14-MAR-2001 36000 Mileage at Failure(s)	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE STALLED IN OCT 2000. DEALER FOUND NOTHING. ON 14 MAR 2001, CONSUMER WAS AT STOP LIGHT, APPLIED GAS AND VEHICLE DID NOT MOVE FORWARD. THEN, PUT VEHICLE IN REVERSE, AGAIN NOTHING. CONSUMER PUT BACK IN DRIVE, AND VEHICLE SURGED FORWARD, ENGINE REVVED. DEALER AGAIN FOUND NOTHING. *AK

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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.



J.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 758

Date Received

16-MAR-2001

Od on

rt dt

od rt

up hr

Reference No.

883255

Work Number

Home Number

OWNER INFORMATION (Type or Print)

680793

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

☒ YES

☐ NO

In the absence of a signature, your name and address to the vehicle manufacturer.

Signature of Owner

Date 4/30/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of
on driver's side)

Vehicle Make

Vehicle Model

Vehicle Year

Current Odometer Reading

OLDSMOBILE

ACHIEVA

1997

36406

Purchase Date

4/30/97

Dealer's Name Anderson Automotive Group

Engine Size
(CID/CC/L)

☐ Turbo

☐ Diesel

☐ Gas

☒ Fuel Injection

☒ New ☐ Used

City Baltimore State MD Zip Code 21218

No Cylinders

4

Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual

☒ Yes

☐ 3-Point Belt

☐ Motor-belt

☒ Yes

☐ Front

☐ Rear

☐ 4-Wheel

☒ Automatic

☐ No

☐ Driverside Airbag

☐ 2-Point Belt

☐ No

☐ Other

☐ Sport Utility

☐ Truck

☒ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component

06420000

Part Name(s)

FUEL THROTTLE LINKAGES ACCELERATOR RIGID

Location

☐ Left

☐ Right

☐ Front

☐ Rear

Failed Part(s)

☐ Original

☐ Replacement

No of Failures

Date(s) of Failure(s) 14-MAR-2001

Mileage at Failure(s) 36000

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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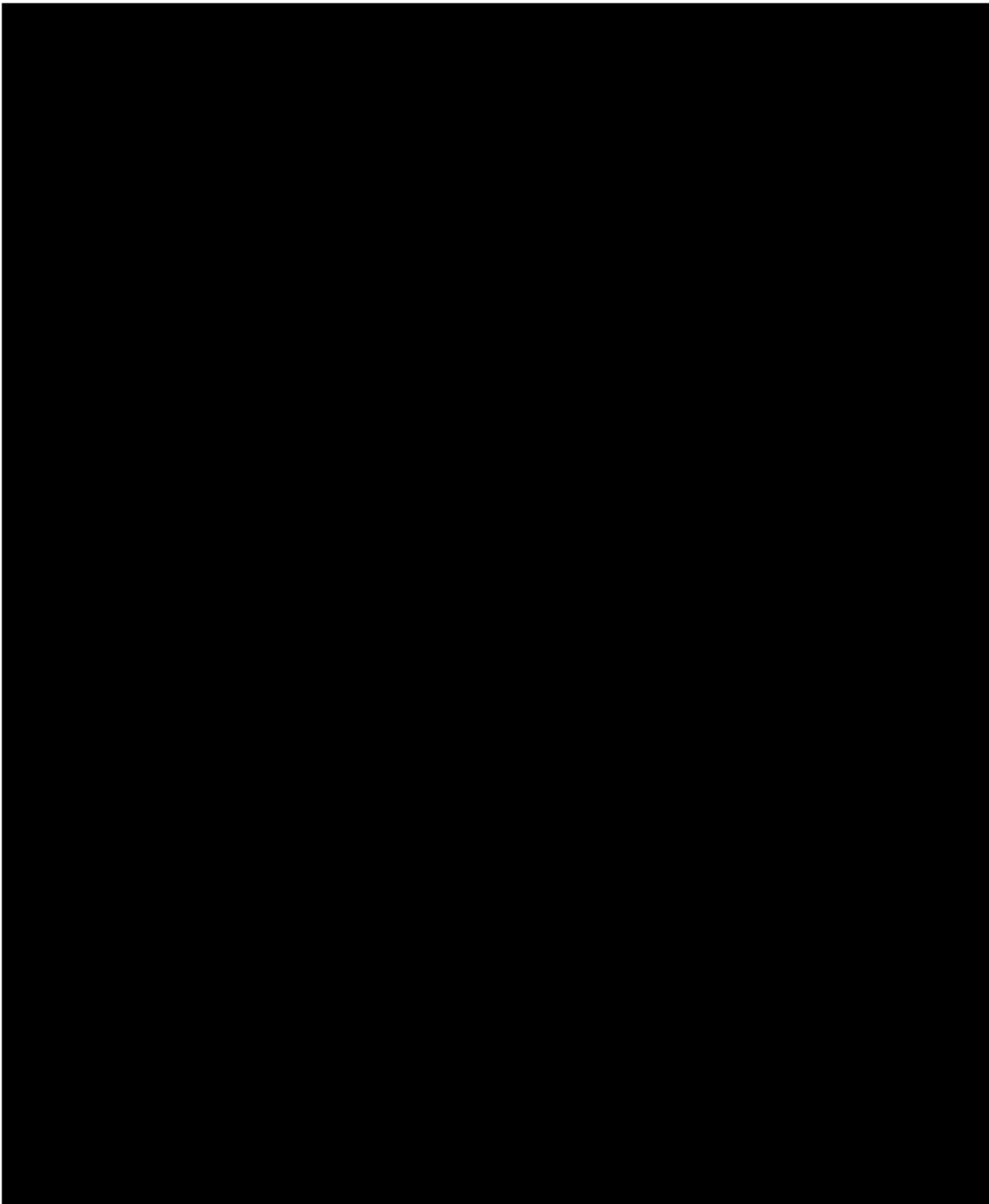
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THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)

(Page 1 through Page 7)

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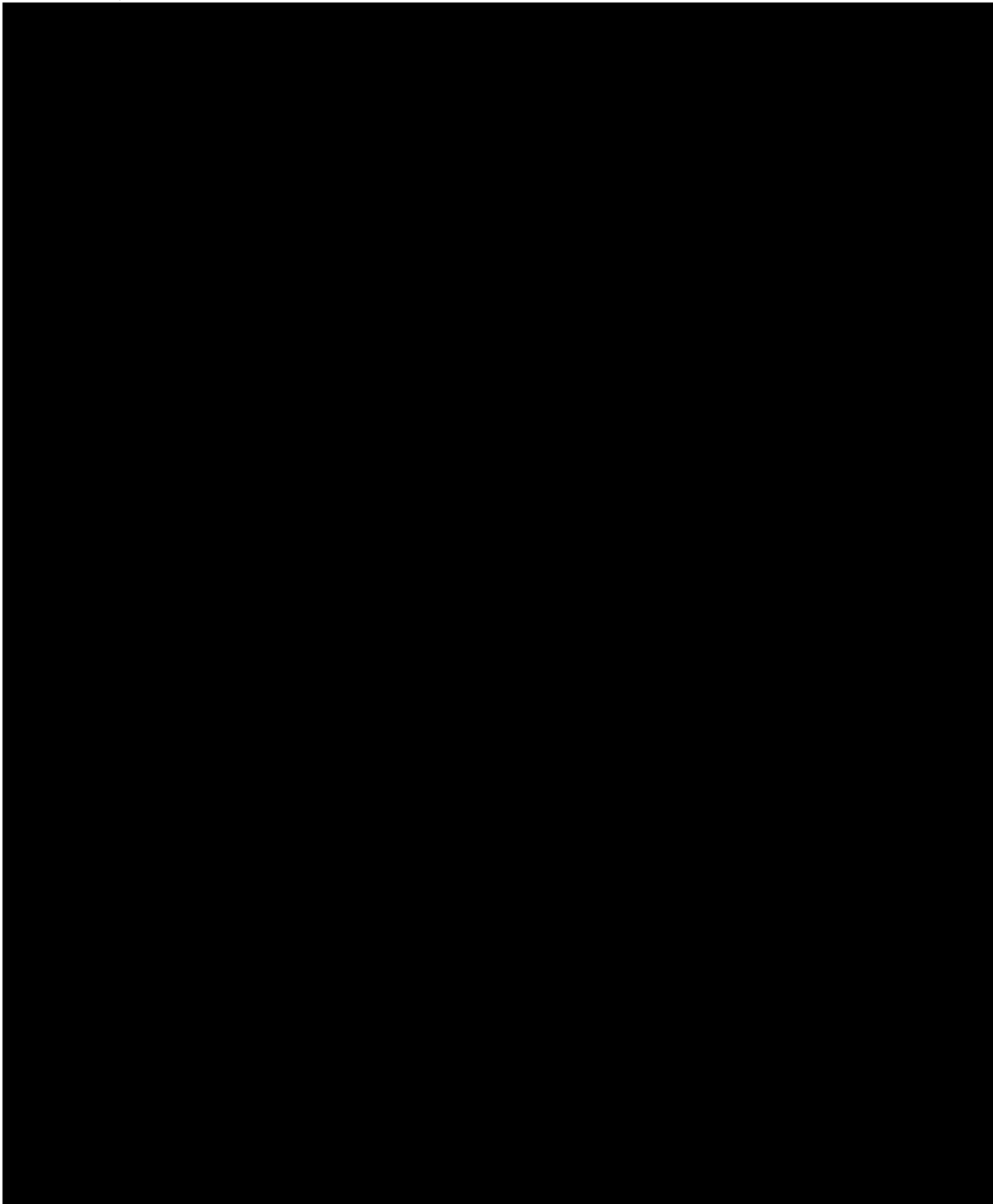
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