



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 117**

Date Received

19-MAR-2001

Ord. or  
rt. dt  
pd. rt  
rp. ltr

Reference No.

883414

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) <small>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1G2NE15MXSM565817	PONTIAC	GRAND AM	1995			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input 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"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" 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"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Component 10421000	Part Name(s) VISUAL SYSTEMS:GLASS:POWER WINDOW DOOR AND SIDE	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failure	Date(s) of Failure(s) 30-MAY-1997 40 Mileage 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 Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

POWER WINDOW ON PASSENGER'S SIDE WENT OUT. HAD WINDOW REPLACED UNDER WARRANTY. PROBLEM STILL EXISTS, BUT IS CONTINUOUS. MANUFACTURER INDICATED CURRENTLY, VEHICLE'S WARRANTY EXPIRED. \*AK

CONTINUED ON REVERSE

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 117

Date Received CITY  
19-MAR-2001  
OFFICE OF PUBLIC AFFAIRS

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No.  
883414

OWNER INFORMATION (Type or Print)

681058

Work Number

Home Nur

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  YES  NO  
In the absence of \_\_\_\_\_ name and address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date 09/08/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side) \_\_\_\_\_  
Vehicle Make PONTIAC Vehicle Model GRAND AM Vehicle Year 1995 Current Odometer Reading 40,250

Purchase Date (New) July 29, 1995 Dealer's Name MIKE Haggerty Engine Size (CID/CC/L) \_\_\_\_\_  
 New  Used City Oak Lawn State IL Zip Code 60453 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 UT  Van  Truck  Minivan  Motorcycle  Other  
Body Style  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10121000 Part Name(s) VISUAL SYSTEMS:GLASS:POWER WINDOW DOOR AND SIDE Location  Left  Right  Front  Rear  
Failed Part(s)  Original  Replacement

No. of Failures 3 Date(s) of Failure(s) 30-MAY-1997 - 10-5-98 - 2-27-01 Failed Part(s) Available?  Yes  No  
Mileage at Failure(s) 40 NHTSA Previously Contacted?  Yes  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  Yes  No Fire  Yes  No Number of Persons Injured \_\_\_\_\_ Number of Fatalities \_\_\_\_\_ Estimated Property Damage \_\_\_\_\_ Reported to Police  Yes  No

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

POWER WINDOW ON PASSENGER'S SIDE WENT OUT. HAD WINDOW REPLACED UNDER WARRANTY. PROBLEM STILL EXISTS, BUT IS CONTINUOUS. MANUFACTURER INDICATED CURRENTLY, VEHICLE'S WARRANTY EXPIRED. \*AK

- (1) ORIGINAL PART - 7-29-95
  - (2) FIRST Replacement - 5-30-97 (WARRANTY)
  - (3) SECOND Replacement - 10-5-98 (GOODWILL OFFERS AFTER WARRANTY)
  - (4) THIRD Replacement - 2-27-01 (PAID by me) COVER
- (SEE ATTACHED BILLS)

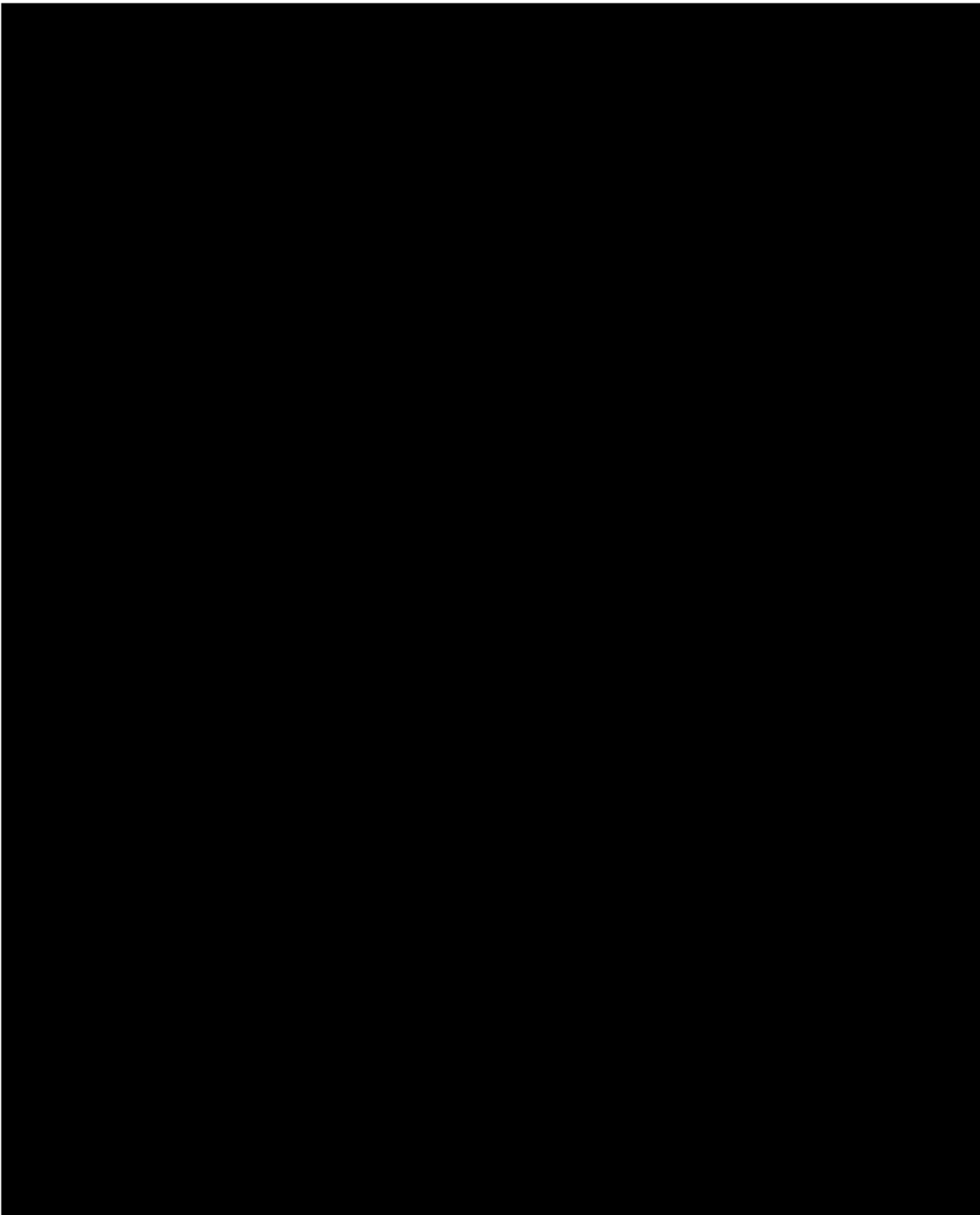
CONTINUE ON BACK IF NEEDED

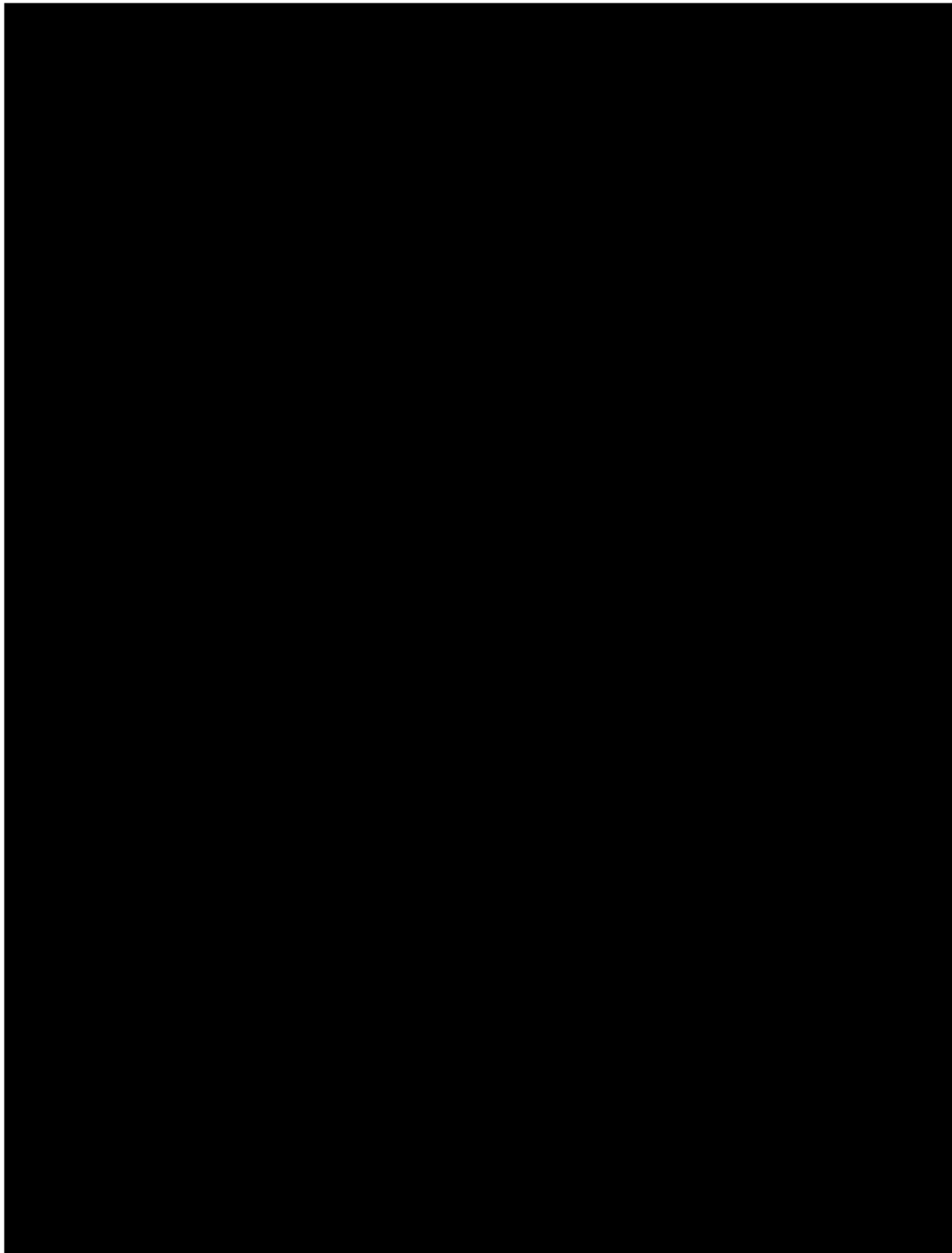
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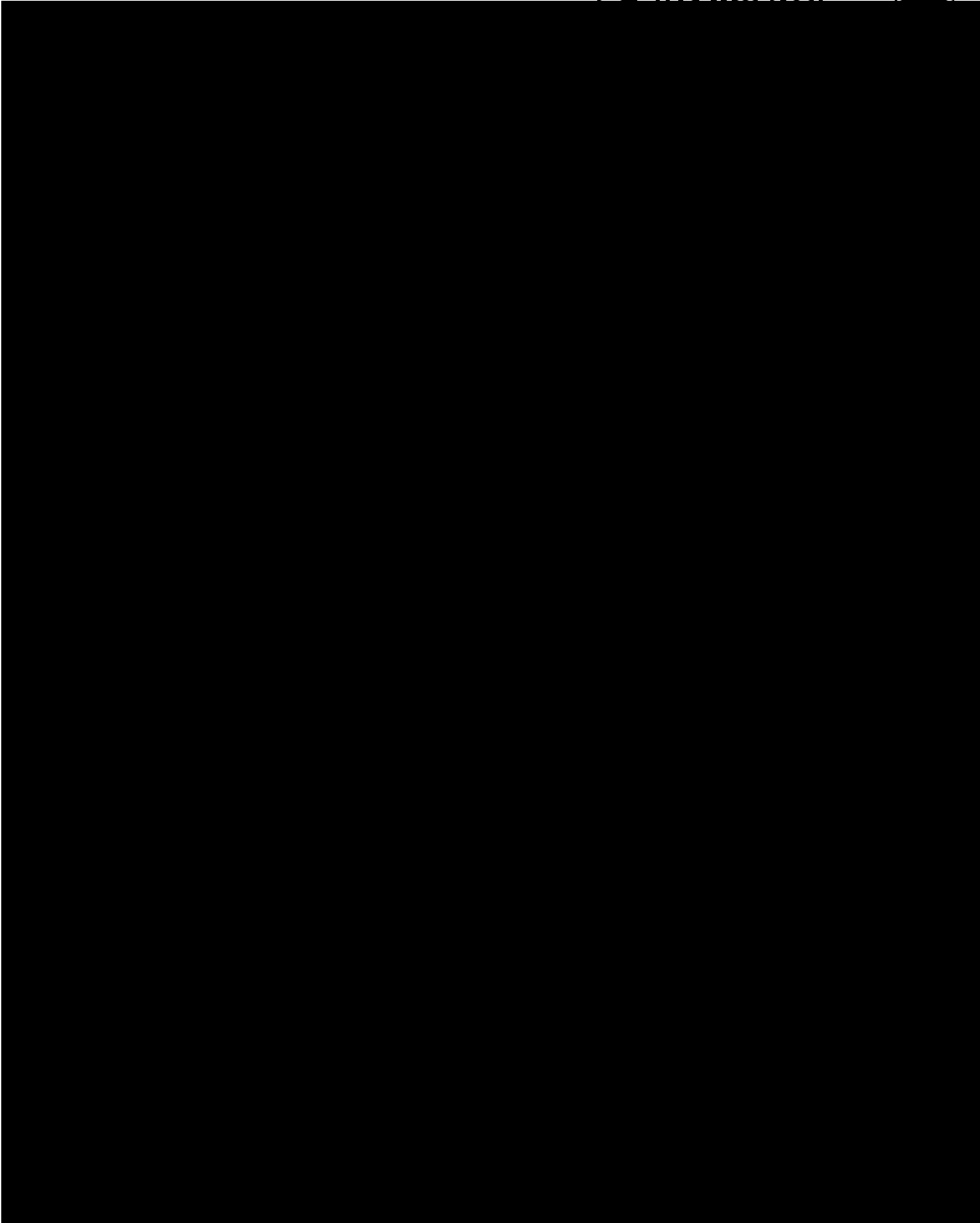
THE FOLLOWING PAGES ARE WITHHELD TO  
PROTECT UNWARRANTED INVASION OF  
PERSONAL PRIVACY PURSUANT TO  
EXEMPTION 6 OF THE FREEDOM OF  
INFORMATION ACT, 5 U.S.C. 552(b)(6)

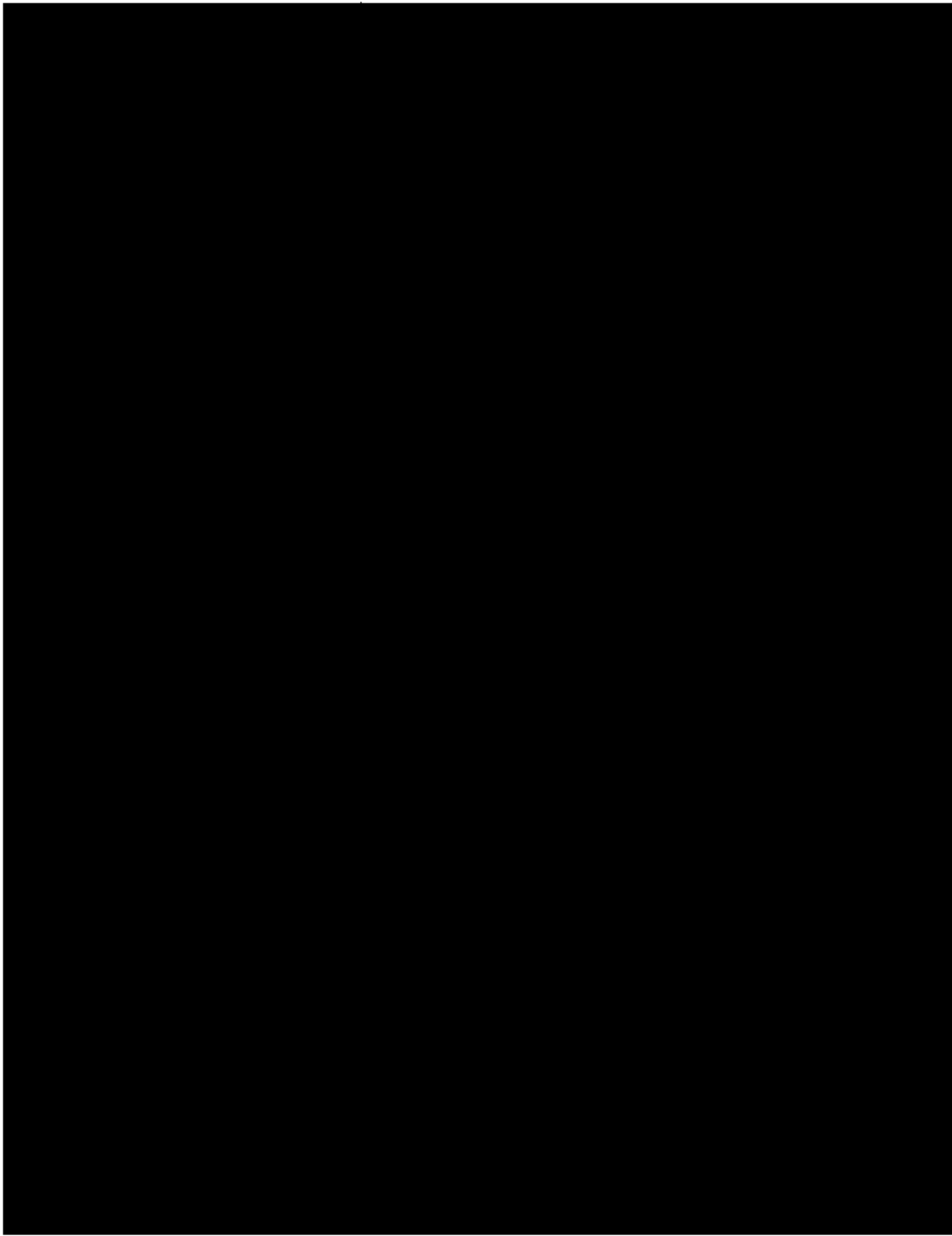
(Page 1 through Page 5)











Dear Sir or Madam.

Add To  
883414

7-26-01

COPIED

In April 2001, I filed a  
complaint against G.P.A.C, in  
regard to a defective power window  
in my 95 Pontiac. The  
reference # is 883414. I would  
appreciate knowing the status  
of this claim. - VDD  
Thank you

REFERENCE  
ON 07/21/01  
OFFICE  
DEFECTS INVESTIGATION

JAN 10 2002

Dear Consumer:

Thank you for your correspondence to the National Highway Traffic Safety Administration (NHTSA). In order to respond to the overwhelming number of letters received, we are answering you with this form letter.

NHTSA is the Federal agency responsible for improving safety on our Nation's highways. We are authorized to order manufacturers to recall and repair vehicles or items of motor vehicle equipment when our investigations indicate that they contain serious safety defects in their design, construction, or performance. In order for the agency to initiate an investigation, sufficient data must exist to warrant the expenditure of agency resources. We cannot act on isolated problems or disputes between individual owners and dealers or manufacturers.

If your letter concerned a motor vehicle or motor vehicle equipment problem, we appreciated the report you provided. Reports from motorists are a very important source of information for us. The information you have provided will be reviewed and entered into our data system. It will be used with other reports to identify safety defect trends that require our attention. Enclosed is a booklet that describes the process NHTSA follows in determining whether an investigation should be initiated.

If your letter requested motor vehicle or motor equipment information, we recommend that you visit our Internet web site at <http://www.nhtsa.dot.gov/cars/problems>. You may also contact our toll-free DOT Auto Safety Hotline (Hotline) at 1-888-DASH-2-DOT (1-888-327-4236). One of our representatives may be able to provide the requested safety information. If our telephones are busy, or you call during non-working hours, you can leave your name, telephone number and a short subject on our recording system. A Hotline representative will return your call.

If your letter concerned a problem with the service performed by a motor vehicle repair facility, or a request for reimbursement, this type of complaint does not fall under our jurisdiction. If you have not done so, you may wish to consider contacting your local Consumer Protection Agency, Better Business Bureau, and your state Office of Attorney General regarding your problem or request. You may also ask your dealership for a meeting with the manufacturer's district manager regarding your problem or request.

The Federal Trade Commission (FTC) has jurisdiction over non-safety defects, fraud or deception, warranty and dealership problems, remuneration matters, and fair trade practices. There are three ways you can contact the FTC: by toll free telephone: 1-877-FTC-HELP (1-877-382-4357); by mail: Federal Trade Commission, CRC-240, Washington, DC 20580; and by using the Internet complaint form at <http://www.ftc.gov/ftc/complaint.htm>.

If I can be of any further assistance, I can be contacted at 1-202-366-5211.

Sincerely,

Alberto A. Jimenez, Chief  
Information Management Staff  
Office of Defects Investigation  
Safety Assurance

Enclosure