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

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: 26-MAR-2001

od_or ____
rt_dt ____
od_rt ____
up_ltr ____

Reference No. 884211

[redacted]

[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 Readin
1G2WP52K9WF272784	PONTIAC	GRAND PRIX	1998	

Purchase Dat ______ ☐ New ☒ Used

Dealer's Name______________________ City__________ State________ Zip Code__________

Engine Size (CID/CC/L ____ No Cylinders ______

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
09202000	LIGHTING:LAMP OR SOCKET:HEAD LIGHTS	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s) / Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
	Date(s) of Failure(s): 12-MAR-2001 58 Mileage at Failure(s)______	☐ Yes ☐ No	☐ 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 Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

HEADLIGHT LENS COVER HAD FALLEN OFF. LIGHT BULBS HAVE BEEN BLOWN DUE TO CONTACT WITH WATER AND NO COVERING. PROBLEM WAS NOT COVERED UNDER WARRANTY.*AK

CONTINUE 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 117

Date Received:
01 APR 23 P1:0
26-MAR-2001
OFFICE OF DEFECTS INVESTIGATION

Od_ar ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No.
884211

OWNER INFORMATION (Type or Print)

[redacted] 682716

Work Numbe [redacted]
Home Numbe [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 [redacted] Date 4/16/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
[redacted]	PONTIAC	GRAND PRIX	1998	60,000

Purchase Date 10/27/00
☐ New ☒ Used

Dealer's Name MCQUILLENS
City GIRARD State PA Zip Code 16417

Engine Size (CID/CC/L 3.8 L
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 Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other

Body Style: ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
0920200	LIGHTING:LAMP OR SOCKET:HEAD LIGHTS	☒ Left ☒ Front ☒ Right ☐ Rear	☒ Original ☐ Replacement

No of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
2	12-MAR-2001 18 MAR 2001 Mileage at Failure(s) 58,000 Vehicle Speed at Failure(s) STOPPED	☒ Yes ☐ No	☐ 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	0	0	0	☐ Yes ☒ No

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

HEADLIGHT LENS COVER HAD FALLEN OFF. LIGHT BULBS HAVE BEEN BLOWN DUE TO CONTACT WITH WATER AND NO COVERING. PROBLEM WAS NOT COVERED UNDER WARRANTY.*AK

CONTINUE ON BACK IF NEEDED