



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 252

Date Received

25-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

889192

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) (Locate at bottom of windshield or driver's side) 1G3WH54T4PD348407	Vehicle Make OLDSMOBILE	Vehicle Model CUTLASS	Vehicle Year 1993	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03250000 03270000	Part Name(s) BRAKES:HYDRAULIC:ANTI-SKID SYSTEM BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 0	Date(s) of Failure(s) 04-MAY-2001 Failure(s) 29000 Mileage at Failure(s) 0	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 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

HE WAS TRAVELING ON HIGHWAY WENT TO APPLY BRAKES AND PEDAL WENT ALL THE WAY DOWN TO FLOOR. BRAKE CALIPER AND ONE FRONT BRAKE PAD WENT. VEHICLE WENT THROUGH TRAFFIC LIGHT. HE PULLED HIS EMERGENCY BRAKES. DEALERSHIP WAS AWARE OF PROBLEM. WHEN CONSUMER HAD OIL CHANGE SHE ASKED MECHANIC TO SHAKE CALIPER BRAKES PAD. HE TOLD CONSUMER VEHICLE HAD TO HAVE 107,000 MILES TO BE CHECKED. *AK

COPIES OF THIS FORM ARE:

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 TransportationNational 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 252

Date Received

01 JUN 25 AM 9:25
25-MAY-2004OFFICE
RECEIVED INVESTIGATION

Od_or

g_dt

od_rt

up_ltr

Reference No.

889192

Work Number

Home Number

OWNER INFORMATION (Type or Print)

694127

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.☒ YES☐ NO

Signature of Owner

Date 6/5/04

VEHICLE INFORMATION

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

1G3WH54T4PD348407

Vehicle Make

OLDSMOBILE

Vehicle Model

CUTLASS

Vehicle Year

1993

Current Odometer Reading

29000

Purchase Date

1993

Dealer's Name

ED MERSE AUTO PLAZA

Engine Size

(CID/CC/L)

No Cylinders

☐ Turbo
☐ Diesel
☒ Gas
☐ Fuel Injection
☒ New ☒ Used

City Port Richey

State FL

Zip Code 34668

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☐ Van☐ Minivan☐ Other

Sport Utl

☐ Truck☐ Motorcycle

Body Style

☐ 2-Door☒ 4-Door☐ Stationwagon☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component

03280000

03270000

Part Name(s)

BRAKES:HYDRAULIC:ANTI-SKID SYSTEM

BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM

Location

☐ Left☐ Front☒ Right☒ Rear

Failed Part(s)

☒ Original☐ Replacement

No of Failures

0

Date(s) of Failure(s)

04-MAY-2001

Mileage at Failure(s)

29000

Vehicle Speed at Failure(s)

0 ft per hour

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

0

Number of Fatalities

0

Estimated Property Damage

\$434.37

Reported to Police

☐ Yes☒ No

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

HE WAS TRAVELING ON HIGHWAY WENT TO APPLY BRAKES AND PEDAL WENT ALL THE WAY DOWN TO FLOOR. BRAKE CALIPER AND ONE FRONT BRAKE PAD WENT. VEHICLE WENT THROUGH TRAFFIC LIGHT. HE PULLED HIS EMERGENCY BRAKES. DEALERSHIP WAS AWARE OF PROBLEM. WHEN CONSUMER HAD OIL CHANGE SHE ASKED MECHANIC TO ~~SHAKE~~ *check* CALIPER BRAKES PAD. HE TOLD CONSUMER VEHICLE HAD TO HAVE 107,000 MILES TO BE CHECKED. *AK My son, Gary was in Tampa coming to Tampa Springs to pick me up at Helen Ellen Hospital (waiting to be discharged). He found a vehicle place and had it repaired. -Upsetting day! He could have been killed.

CONTINUE OR BACK IF NEEDED

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