



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** 1038

Date Received

07-JUN-2001

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

Reference No.

889952

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>(Leave blank for use by manufacturer if desired.)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
<b>PLEASE PROVIDE #</b>	CHEVROLET	CAVALIER	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 type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input 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 05150020	Part Name(s) ENGINE:GASKETS	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) 05-JUN-2001 150 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
--	---	---------------------------	----------------------	--------------------------	---

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

THE HEAD GASKET WAS REPLACED WITH 71,000 MILES. VEHICLE HAS 150,000 MILES AND IS EXPERIENCING THE SAME PROBLEM OF LEAKING ANTI-FREEZE WHEN THE GASKET HAD TO BE REPLACED. DEALER WAS CONTACTED BUT REFUSES TO REMEDY THE PROBLEM WITH CUSTOMER SATISFACTION

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 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

DATE RECEIVED  
07-JUN-2001  
OFFICE OF INVESTIGATION

Reference No. 889952

OWNER INFORMATION (Type or Print)  
696001  
[Redacted]  
Home Number [Redacted]  
Work Number [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) \_\_\_\_\_ (It is located at bottom of windshield on driver's side)  
Vehicle Make CHEVROLET  
Vehicle Model CAVALIER  
Vehicle Year 1995  
Current Odometer Reading 155,000

Purchase Date \_\_\_\_\_ Dealer's Name Talisco  
City, M.I., and State W.H. zip code \_\_\_\_\_  
Engine Size (CID/CYL) 2.2 No Cylinders  
Turbo  Diesel  Gas  Fuel Injection

Transmission Type  Automatic  Manual  
Antilock Brakes Yes  No   
Restraint System  3-Point Belt  2-Point Belt  
Driver's Side Airbag  Passenger Side Airbag   
Cruise Control Yes  No   
Drive Train  Front  Rear  4-Wheel  
Vehicle Type  Car  Van  Minivan  Other   
 Sport Util.  Truck  Motorcycle  
Body Style  2-Door  4-Door  Station Wagon  Pick Up Truck  Other

Component 05150021 ENGINE: GASKETS: WATER COVER Head Gasket  
Part Name(s) Location Front  Left  Right  Rear   
Failed Part(s) Original  Replacement   
No of Failures 2  
Date(s) of Failure(s) 05-JUN-2001  
Mileage at Failure(s) 150  
Vehicle Speed at Failure(s) \_\_\_\_\_

Application Incident Information (Please describe in detail the incident(s), failure(s), crash(es), and injury(es) on the back of this form)  
Crash Yes  No   
Fire Yes  No   
Number of Persons Injured N/A  
Number of Failures \_\_\_\_\_  
Estimated Property Damage \_\_\_\_\_  
Reported to Police Yes  No

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

HEAD GASKET WAS REPLACED WITH 71,000 MILES. VEHICLE HAS 150,000 MILES AND WAS EXPERIENCING SAME PROBLEM OF LEAKING ANTI-FREEZE WHEN GASKET HAD TO BE REPLACED. DEALER WAS CONTACTED BUT REFUSED TO REMEDY PROBLEM WITH CUSTOMER'S SATISFACTION. AK

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 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.