



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

02-JUL-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

891879

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)<br><small>(Location at bottom of windshield and driver's side door)</small><br><b>1G3AG5546R6421837</b>                                                                                                                                | Vehicle Make<br><b>OLDSMOBILE</b>                                                         | Vehicle Model<br><b>CUTLASS</b>                                                                                                                                                                                                  | Vehicle Year<br><b>1994</b>                                                              | Current Odometer Reading                                                                                                                     |
| Purchase Date<br><input checked="" type="checkbox"/> New <input type="checkbox"/> Used                                                                                                                                                                          | Dealer's Name _____<br>City _____ State _____ Zip Code _____                              |                                                                                                                                                                                                                                  | Engine Size<br>(CID/CC/L) _____<br>No Cylinders _____                                    | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic                                                                                                                                                                      | Antilock Brakes<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Restraint System<br><input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel<br><input type="checkbox"/> Passengerside Airbag | Cruise Control<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Drive Train<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel                           |
| Vehicle Type<br><input type="checkbox"/> Car <input type="checkbox"/> Sport Util<br><input type="checkbox"/> Van <input type="checkbox"/> Truck<br><input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____ |                                                                                           | Body Style<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other _____                      |                                                                                          |                                                                                                                                              |

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

|                              |                                                                             |                                                                                                                                          |                                                                                             |
|------------------------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br><b>05100000</b> | Part Name(s)<br><b>ENGINE</b>                                               | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No of Failure                | Date(s) of Failure(s) <b>15-JUN-2001</b><br>Mileage at Failure(s) <b>52</b> | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|--------------------------|-------------------------------------------------------------------------------------------|

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

WHILE TRAVELING 55MPH ON HIGHWAY WITHOUT PRIOR WARNING CONSUMER BEGAN TO EXPERIENCE ENGINE FAILURE. AFTER VEHICLE WAS TAKEN TO AN OUT OF STATE REPAIR SHOP IT WAS DISCOVERED THAT ENGINE HAD BLOWN UP. CONSUMER REPLACED ENTIRE ENGINE AT HIS OWN EXPENSE. WHEN CONSUMER RETURNED HOME, DEALER AND MANUFACTURER WERE CONTACTED, BUT REFUSED TO REINBURSE FOR REPAIRS. PLEASE PROVIDE FURTHER DETAILS.\*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.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  <b>U.S. Department of Transportation</b><br><b>National Highway Traffic Safety Administration</b><br>www.nhtsa.dot.gov/hotline<br>1-888-327-4236<br>NATIONWIDE 1-888-DASH-2-DOT<br><b>Vehicle Owner's Questionnaire (VOQ)</b>                                                                                                                                                                                                                          |                                                                                                                                                                | <b>FOR AGENCY USE ONLY</b><br>1038                                                                                                                                                                               |                                                                                                                                                                                                               |
| <b>Date Received</b><br>02-JUL-2001<br><b>Office</b><br>INVESTIGATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                | <b>Reference No.</b><br>881878                                                                                                                                                                                   |                                                                                                                                                                                                               |
| <b>Work Number</b><br>[Redacted]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                | <b>Home Number</b><br>[Redacted]                                                                                                                                                                                 |                                                                                                                                                                                                               |
| <b>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?</b><br><input type="checkbox"/> YES <input type="checkbox"/> NO                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>Signature of Owner</b><br>[Redacted]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>Vehicle Identification No. (VIN)</b><br>1G3AG5546R6421837<br><small>(Located at bottom of windshield in driver's side)</small>                                                                                                                                                                                                                                                                                                                                                                                                            | <b>Vehicle Make</b><br>OLDSMOBILE                                                                                                                              | <b>Vehicle Model</b><br>CUTLASS                                                                                                                                                                                  | <b>Vehicle Year</b><br>1994                                                                                                                                                                                   |
| <b>Purchase Date</b><br>DEC 1994                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>Dealer's Name</b><br>HOLMES OLDSMOBILE                                                                                                                      | <b>City/State/Zip</b><br>DES MOINES, IA 50325                                                                                                                                                                    | <b>Engine Size</b><br>2.2 (liters)<br><b>Cylinders</b><br>4<br><input checked="" type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection |
| <b>Transmission Type</b><br><input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Antilock Brakes</b><br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                  | <b>Restraint System</b><br><input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Driver's Side Airbag <input type="checkbox"/> Passenger's Side Airbag | <b>Drive Train</b><br><input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel                                                                                |
| <b>Vehicle Type</b><br><input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other                                                                                                                                                                                                                                                                                                                                                                                  | <b>Vehicle Type</b><br><input type="checkbox"/> Spot Utility <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other | <b>Body Style</b><br><input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other                | <b>Location</b><br><input type="checkbox"/> Front <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Rear                                                                  |
| <b>Failed Part(s)</b><br><input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>Failed Part(s)</b><br><input type="checkbox"/> NHTSA Previously Contracted? <input checked="" type="checkbox"/> No                                          | <b>Available?</b><br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                         | <b>Contracted?</b><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                     |
| <b>APPLICATION INCIDENT INFORMATION</b><br>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>Component</b><br>05100000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Part Name(s)</b><br>ENGINE                                                                                                                                  | <b>Location</b><br><input checked="" type="checkbox"/> Front <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Rear                                                          | <b>Failed Part(s)</b><br><input type="checkbox"/> Original <input type="checkbox"/> Replacement                                                                                                               |
| <b>No. of Failures</b><br>1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>Date(s) of Failure(s)</b><br>13-JUN-2001                                                                                                                    | <b>Mileage at Failure(s)</b><br>52100                                                                                                                                                                            | <b>Vehicle Speed at Failure(s)</b><br>55 MPH                                                                                                                                                                  |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>Component</b><br>05100000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>Part Name(s)</b><br>ENGINE                                                                                                                                  | <b>Location</b><br><input checked="" type="checkbox"/> Front <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Rear                                                          | <b>Failed Part(s)</b><br><input type="checkbox"/> Original <input type="checkbox"/> Replacement                                                                                                               |
| <b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| WHILE TRAVELING 55MPH ON HIGHWAY WITHOUT PRIOR WARNING CONSUMER BEGAN TO EXPERIENCE ENGINE FAILURE. AFTER VEHICLE WAS TAKEN TO AN OUT OF STATE REPAIR SHOP IT WAS DISCOVERED THAT ENGINE HAD BLOWN UP. CONSUMER REPLACED ENTIRE ENGINE AT HIS OWN EXPENSE. WHEN CONSUMER RETURNED HOME, DEALER AND MANUFACTURER WERE CONTACTED, BUT REFUSED TO REIMBURSE FOR REPAIRS. PLEASE PROVIDE FURTHER DETAILS. CAR WAS SERVICED BY KEN WISE BOJAK OLDSMOBILE MARSHALLTOWN, IA 50558-A LETTER WITH ALL THE DETAILS WAS MAILED TO YOU BY CERTIFIED MAIL |                                                                                                                                                                |                                                                                                                                                                                                                  |                                                                                                                                                                                                               |
| <b>Crash</b><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Fire</b><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                             | <b>Number of Persons Injured</b><br>_____                                                                                                                                                                        | <b>Number of Fatalities</b><br>_____                                                                                                                                                                          |
| <b>Estimated Property Damage</b><br>_____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <b>Reported to Police</b><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                               | 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.