



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** §20

Date Received

06-SEP-2001

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

Reference No.

895833

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 driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
<b>FILL IN PLEASE</b>	PONTIAC	GRAND AM	1999	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Util <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____
		<input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel			<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 01400000	Part Name(s) STEERING:GEAR:RACK AND PINION	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) 01-NOV-2000 46000 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 0	Number of Fatalities 0	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)

WHILE DRIVING BETWEEN 60 AND 65 MPH LOST CONTROL OF VEHICLE. VEHICLE CONTINUED FOR ONE MILE BEFORE IT DRIFTED INTO THE PROPER LANE. DEALERSHIP REPAIRED A CRACKED BRACKET WHICH HELD RACK AND PINION ASSEMBLY. PLEASE PROVIDE ANY ADDITIONAL INFORMATION / ATTACHMENTS.\*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.



# Vehicle Owner's Questionnaire (VOQ)

DOT Auto Safety Hotline

U.S. Department of Transportation  
National Highway Traffic Safety Administration

NATIONWIDE 1-888-DASH-2-DOT  
1-888-327-4238  
www.nhtsa.dot.gov/hotline

## OWNER INFORMATION (Type or Print)

713180

Work Num: [Redacted]  
Home Num: [Redacted]

Reference No. 895833

Date Received: 01 OCT 15 AM 9:00  
OFFICE: SECTS INI STIGATION

FOR AGENCY USE ONLY 920

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES  NO   
In the absence of an authorized signature, please print your name and address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 10/20/01

Vehicle Ident. No. (VIN): [Redacted]  
Vehicle Make: PONTIAC  
Vehicle Model: GRAND AM  
Vehicle Year: 1998  
Current Odometer Reading: 48,000

Purchase Date: 10/99  
Dealers Name: Meyer Pontiac  
City: Belleville State: IL Zip Code: 62222  
Engine Size (CID/CC): [Redacted]  
Fuel Injection: Turbo  Diesel  Gas  Fuel Injector

Transmission Type: Automatic  Manual   
Restraint System: 3-Point Belt  2-Point Belt   
Motorcycle: Motorbelt  Diverside Airbag  Passenger-side Airbag   
Drive Train: Front  Rear  4-Wheel   
Vehicle Type: Car  Van  Minivan  Other   
Body Style: 2-Door  4-Door  Stationwagon  Truck  Pick Up  Truck

Component: 01400000  
Part Name(s): STEERING; GEAR; RACK AND PINION  
Location: Left  Right   
Failed Part(s): Original  Replacement

No of Failures: [Redacted]  
Date(s) of Failure(s): 01-NOV-2000  
Mileage at Failure(s): 46000  
Vehicle Speed at Failure(s): [Redacted]

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: Reported to Police: Yes  No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)  
WHILE DRIVING BETWEEN 60 AND 65 MPH LOST CONTROL OF VEHICLE. VEHICLE CONTINUED FOR ONE MILE BEFORE IT DRIFTED INTO THE PROPER LANE. DEALERSHIP REPAIRED A CRACKED BRACKET WHICH HELD RACK AND PINION ASSEMBLY. PLEASE PROVIDE ANY ADDITIONAL INFORMATION / ATTACHMENTS, IF ANY.

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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.

CONTINUE ON BACK IF NEEDED