



Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.
CORRECT MARK: ●

Form Approved: O.M.B. No. 2127-C008

FOR AGENCY USE ONLY

Date Received <u>7/24/01</u>	Order _____
Reference No. _____	Model _____
	Code _____
	Unit _____

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side)	VEHICLE MAKE <u>Saturn</u>	VEHICLE MODEL <u>SLZ</u>	MANUFACTURE DATE	MODEL YEAR <u>1997</u>
VEHICLE MANUFACTURER				
☐ BMW ☐ Ford ☐ Honda ☐ Nissan ☐ Subaru ☐ Volvo ☒ Other <u>Saturn</u> ☐ DaimlerChrysler ☐ General Motors ☐ Hyundai ☐ Saab ☐ Toyota ☐ VW				
PURCHASE DATE <u>9/99</u>	☐ New ☒ Used	DEALER'S NAME <u>Saturn of West County</u>	CITY <u>Manchester</u>	STATE <u>MO</u>
ENGINE SIZE (CID/CC) <u>4</u>	FUEL SYSTEM ☐ Turbo ☒ Fuel Injection	FUEL TYPE ☐ Diesel ☒ Gas	TRANSMISSION TYPE ☒ Manual ☐ Automatic	ANTILOCK BRAKES ☒ Yes ☐ No
NO. CYLINDERS <u>4</u>	RESTRAINT SYSTEM ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag ☐ Motorbelt ☐ 3-Point Belt		CRUISE CONTROL ☒ Yes ☐ No	
DRIVETRAIN ☒ Front ☐ Rear	VEHICLE TYPE ☒ Car ☐ Minivan ☐ Truck ☐ Other _____ ☐ Van ☐ Sport Utility ☐ Motorcycle		DOORS ☒ 2-Door ☐ 4-Door	BODY STYLE ☐ Hatchback ☒ Sedan ☐ Pick Up Truck ☐ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT ☐ Child Seat ☐ Electrical Lights & Alarms ☐ Engine & Cooling System ☐ Equipment ☐ Fuel System, Exhaust ☐ Heating, Defrost, Ventilation ☐ Interior ☐ Parking Brake ☐ Power Train ☐ Service Brakes ☐ Steering ☐ Structure ☐ Suspension ☐ Visual Systems ☒ Other <u>restraint system</u>	NO. OF FAILURES <u>1</u>	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	INCIDENT DATE <u>AC</u>	TIRE NAME	COMPLETE TIRE SIZE
	MILEAGE AT INCIDENT	TIRE BRAND ☐ BF Goodrich ☐ Cooper ☐ Firestone ☐ Goodyear ☐ Kelly Springfield ☐ Michelin ☐ Yokohama ☐ Other _____	
	VEHICLE SPEED AT INCIDENT		
FAILED PART(S) ☐ Original ☐ Replacement	NHTSA PREVIOUSLY CONTACTED? ☐ Yes ☐ No		
HANDICAPPED ADAPTIVE ☐ Yes ☐ No	FAILED PART(S) AVAILABLE? ☐ Yes ☐ No		

APPLICABLE 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	NUMBER OF PERSONS INJURED <u>1</u>	CAUSE OF INCIDENT ☐ Wear/Corroded/Rust ☐ Weak/Poor Fit/Loose ☐ Cut/Torn ☐ Disconnect/Fell Off ☐ Erratic/Poor Performance ☐ Excessive Effort ☐ Noisy ☐ Leaks ☐ Short ☐ Locks/Sticks/Grabs ☐ Stability/Vibration ☐ Broken	RESULT OF INCIDENT ☐ Explosion/Fire ☐ Loss of Control ☐ Poor Visibility ☐ Inadvertent Start ☐ Rollover ☐ Stalls ☐ Sudden Acceleration
	FIRE ☐ Yes ☐ No	NUMBER OF FATALITIES <u>1</u>		

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

The new seat belts
(outboard) do not fit
a smaller adult (5'4")
properly. There is
no ability to adjust
them.

Continue on additional page if necessary.

Describe any additional incidents. (Include date and mileage)

The Privacy Act of 1974 (Public Law 93-579) The information is required 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 responses 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.

Make, Model, Year by NCS EW-225238-14854321 H908 Printed in U.S.A.
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HS Form 350 (Rev. 8/98)

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



Complete and return or place in your car manual for future use



VEHICLE OWNER'S

QUESTIONNAIRE (V00Q)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

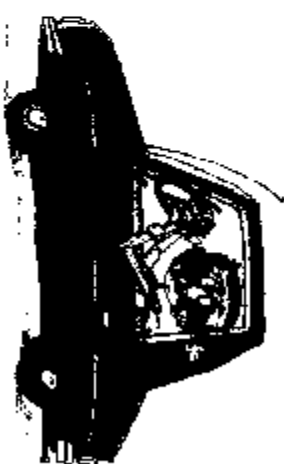
DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Administration

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