

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

Stopped at traffic signal.
 Four began bleeding. Smoke
 from engine compartment.
 Got out to investigate.
 Flames from engine compartment
 called 911
 ON STAR FAILED
 ELECTRICAL LOCKS FAILED
 CAR TOTAL LOSS

Continue on additional page if necessary.

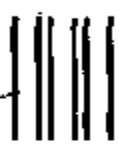
Describe any additional incidents. (Include date and mileage)

Privacy Act of 1974—Public Law 93-579 This information is requested under the 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 could (and does) act 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.

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 S Form 350 (Rev. 8/98)



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 UNITED STATES



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

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



VEHICLE OWNER'S QUESTIONNAIRE (V00)

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

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

www.nhtsa.dot.gov/hotline

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