



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

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: ●

### FOR AGENCY USE ONLY

Date Received

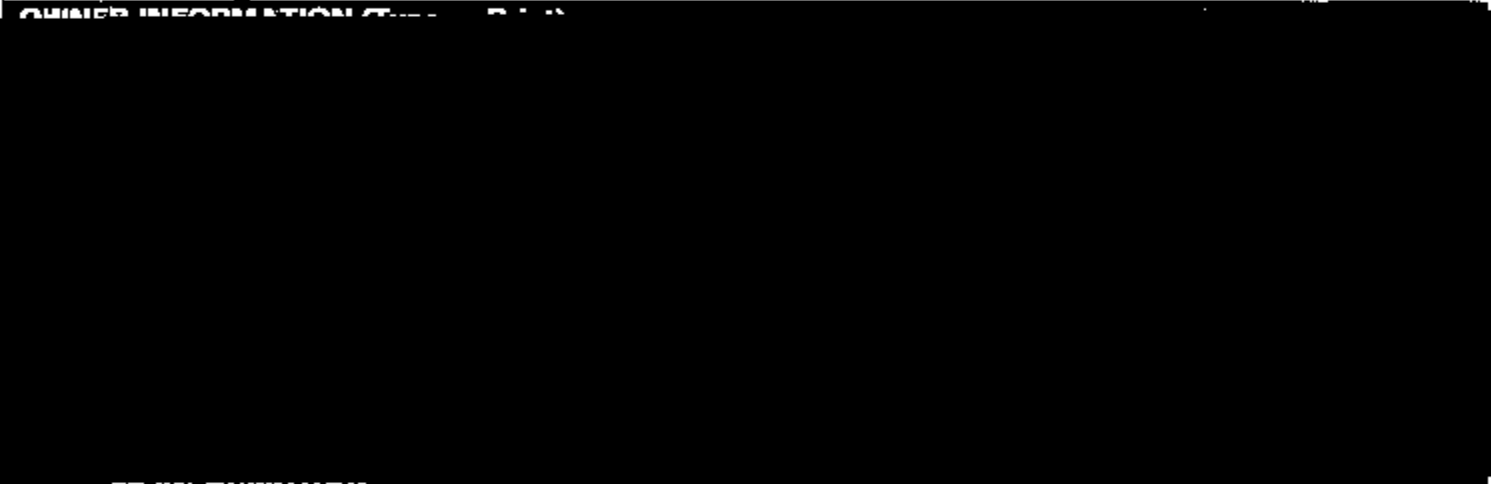
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On-air

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JP-F



VEHICLE IDENT. NO. (VIN) (located at bottom of windshield on driver's side)				VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
1G2WP12K4XF315292				PONTIAC	GRAND PRIX		1999
VEHICLE MANUFACTURER							
<input type="checkbox"/> BMW		<input type="checkbox"/> Ford		<input type="checkbox"/> Honda		<input type="checkbox"/> Nissan	
<input type="checkbox"/> Daimler/Chrysler		<input checked="" type="checkbox"/> General Motors		<input type="checkbox"/> Hyundai		<input type="checkbox"/> Subaru	
		<input type="checkbox"/> Toyota		<input type="checkbox"/> Volvo		<input type="checkbox"/> Other	
		<input type="checkbox"/> Vauxhall		<input type="checkbox"/> VW			
PURCHASE DATE		DEALER'S NAME		CITY		STATE	
SEPT. 2000		CLEWELL AUTO		CAMBRIDGE		OH	
ENGINE SIZE		FUEL SYSTEM		TRANSMISSION TYPE		ANTILOCK BRAKES	
3.5 DO/DO		<input checked="" type="checkbox"/> Fuel Injection		<input checked="" type="checkbox"/> Automatic		<input checked="" type="checkbox"/> Yes	
NO. CYLINDERS		FUEL TYPE		RESTRAINT SYSTEM		CRUISE CONTROL	
6		<input checked="" type="checkbox"/> Gas		<input checked="" type="checkbox"/> Dual Side Air Bag		<input checked="" type="checkbox"/> 2 Point Belt	
		<input type="checkbox"/> Diesel		<input type="checkbox"/> 3-Point Belt		<input checked="" type="checkbox"/> Yes	
		<input type="checkbox"/> Turbo		<input type="checkbox"/> Motorbelt		<input type="checkbox"/> No	
		<input type="checkbox"/> Gas		<input type="checkbox"/> 3-Point Belt			
DRIVETRAIN		VEHICLE TYPE		DOORS		BODY STYLE	
<input checked="" type="checkbox"/> Front		<input checked="" type="checkbox"/> Car		<input checked="" type="checkbox"/> 2-Door		<input checked="" type="checkbox"/> Sedan	
<input type="checkbox"/> Rear		<input type="checkbox"/> Minivan		<input type="checkbox"/> 4-Door		<input type="checkbox"/> Hatchback	
		<input type="checkbox"/> Truck				<input type="checkbox"/> Pick Up Truck	
		<input type="checkbox"/> Motorcycle				<input type="checkbox"/> Station wagon	

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

COMPONENT <input type="checkbox"/> Brake <input type="checkbox"/> Electrical Lights & Alarms <input type="checkbox"/> Engine & Cooling System <input type="checkbox"/> Exhaust <input type="checkbox"/> Fuel System, Exhaust <input type="checkbox"/> Heater, Defrost, Ventilation <input type="checkbox"/> Interior <input type="checkbox"/> Parking Brake <input type="checkbox"/> Power Train <input type="checkbox"/> Service Brakes <input checked="" type="checkbox"/> Steering <input type="checkbox"/> Structure <input type="checkbox"/> Suspension <input type="checkbox"/> Visual Systems <input type="checkbox"/> Other	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	1	TIRE NAME	COMPLETE TIRE SIZE
	NOV. 19, 2001	TIRE BRAND	
	37,807	<input type="checkbox"/> BF Goodrich <input type="checkbox"/> Cooper <input type="checkbox"/> Firestone <input type="checkbox"/> Goodyear <input type="checkbox"/> Kelly Springfield <input type="checkbox"/> Michelin <input type="checkbox"/> Yokohama <input type="checkbox"/> Other	
VEHICLE SPEED AT INCIDENT	FAILED PART(S)		
	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement		
HANDICAPPED ADAPTIVE	FAILED PART(S) AVAILABLE?	NHTSA PREVIOUSLY CONTACTED?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> 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	NUMBER OF PERSONS INJURED	CAUSE OF INCIDENT	RESULT OF INCIDENT
	<input checked="" type="checkbox"/> No	0	<input type="checkbox"/> Wear/Corrosion/Rust <input type="checkbox"/> Weak/Poor Fit/Loose <input type="checkbox"/> Cut/Torn <input type="checkbox"/> Disconnect/Fall Off <input type="checkbox"/> Erratic/Poor Performance <input type="checkbox"/> Excessive Effort	<input type="checkbox"/> Explosion/Fire <input checked="" type="checkbox"/> Loss of Control <input type="checkbox"/> Poor Visibility <input type="checkbox"/> Inadvertent Start <input type="checkbox"/> Rollover <input type="checkbox"/> Stalls <input type="checkbox"/> Sudden Accelerator
	FIRE	NUMBER OF FATALITIES	<input type="checkbox"/> Nifty <input type="checkbox"/> Leaks <input type="checkbox"/> Short <input checked="" type="checkbox"/> Locks/Sticks/Grabs <input checked="" type="checkbox"/> Stability/Vibration <input checked="" type="checkbox"/> Broken	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0		

PLEASE DO NOT WRITE IN THIS AREA



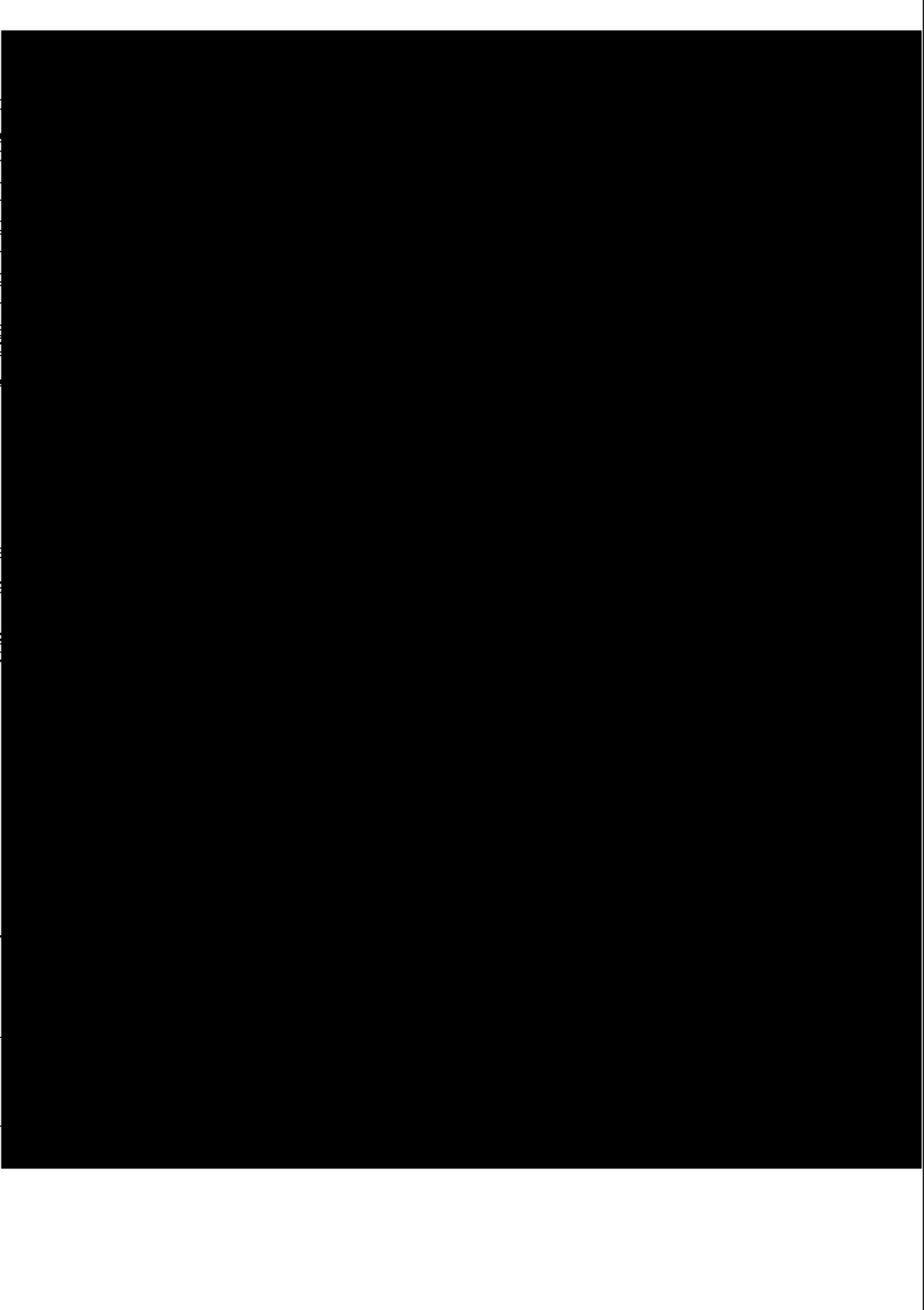
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~~SECRET~~ - ~~TOP SECRET~~

THE FOLLOWING PAGES ARE WITHHELD TO  
PROTECT UNWARRANTED INVASION OF  
PERSONAL PRIVACY PURSUANT TO  
EXEMPTION 6 OF THE FREEDOM OF  
INFORMATION ACT, 5 U.S.C. 552(B)(6)

(Page 1 through Page 5)

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