

JAN 23 2004



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

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

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Ms. Gay P. Kent, Director  
Product Investigations  
General Motors Corporation  
Structure & Safety Integration  
Mail Code 480-106-304  
30500 Mound Road  
Warren, MI 48090-9055

NVS-213 phk  
PE03-059

Dear Ms. Kent:

This letter is to inform you that the Office of Defects Investigation (ODI) of the National Highway Traffic Safety Administration (NHTSA) has opened a Preliminary Evaluation (PE03-059) to investigate allegations of engine stall in model year (MY) 2003 Saab 9-3 vehicles equipped with 2.0 liter engines, and to request certain information.

In a January 16, 2004 letter (copy attached), General Motors Corporation (GM) advised this office that it had decided to conduct a Customer Satisfaction Campaign "to address a potential stall condition on 2003 model year Saab 9-3 vehicles equipped with automatic transmission and the 2.0 L engine." The letter indicates that there are two potential failure modes affecting 12,249 subject vehicles sold in the United States. The problems are corrected by reprogramming the engine management system with corrected software. The letter states that because neither failure mode happens during acceleration and in both cases the vehicle can be immediately restarted, "Saab and GM do not consider these conditions to pose an unreasonable risk to motor vehicle safety."

This office has received 21 reports alleging engine stall without warning in MY 2003 Saab 9-3 vehicles. The reports describe incidents that occur during cruising, acceleration, and deceleration at speeds ranging from 0 to 55 miles-per-hour. Many of the complaints allege multiple failures. Several complaints indicate that the dealers repaired the condition by reprogramming the engine management system. One report alleges that a stall event caused the driver "to rear end the vehicle in front of her. Which in turn caused a four car accident." Another complaint alleges multiple stalling events that occur "while crossing an intersection, making a left-hand turn from a stop sign, or turning in front of traffic," circumstances that could result in potentially serious safety consequences. A copy of each of the reports is enclosed for your information.



DOT AUTO SAFETY HOTLINE  
888-DASH-2-DOT  
888-327-4238

Unless otherwise stated in the text, the following definitions apply to these information requests:

- **Subject vehicles:** all MY 2003 Saab 9-3 vehicles equipped with a 2.0L engine manufactured for sale or lease in the United States.
- **Subject Component(s):** engine management system and associated software programming.
- **Saab:** Saab Cars USA, Inc., and, expand to include foreign parent company where design, engineering and/or manufacturing are undertaken in a foreign country, all of their past and present officers and employees, whether assigned to their principal offices or any of their field or other locations, including all of their divisions, subsidiaries (whether or not incorporated) and affiliated enterprises and all of their headquarters, regional, zone and other offices and their employees, and all agents, contractors, consultants, attorneys and law firms and other persons engaged directly or indirectly (e.g., employee of a consultant) by or under the control of Saab (including all business units and persons previously referred to), who are or, in or after June 2000, were involved in any way with any of the following related to the alleged defect in the subject vehicles:
  - a. Design, engineering, analysis, modification or production (e.g. quality control);
  - b. Testing, assessment or evaluation;
  - c. Consideration, or recognition of potential or actual defects, reporting, record-keeping and information management, (e.g., complaints, field reports, warranty information, part sales), analysis, claims, or lawsuits; or
  - d. Communication to, from or intended for zone representatives, fleets, dealers, or other field locations, including but not limited to people who have the capacity to obtain information from dealers.
- **Alleged defect:** engine stall.
- **Document:** "Document(s)" is used in the broadest sense of the word and shall mean all original written, printed, typed, recorded, or graphic matter whatsoever, however produced or reproduced, of every kind, nature, and description, and all non-identical copies of both sides thereof, including, but not limited to, papers, letters, memoranda, correspondence, communications, electronic mail (e-mail) messages (existing in hard copy and/or in electronic storage), faxes, mailgrams, telegrams, cables, telex messages, notes, annotations, working papers, drafts, minutes, records, audio and video recordings, data, databases, other information bases, summaries, charts, tables, graphics, other visual displays, photographs, statements, interviews, opinions, reports, newspaper articles, studies, analyses, evaluations, interpretations, contracts, agreements, jottings, agendas, bulletins, notices, announcements, instructions, blueprints, drawings, as-builts, changes, manuals, publications, work schedules, journals, statistical data, desk, portable and computer calendars, appointment books, diaries, travel reports, lists, tabulations, computer printouts, data processing program libraries, data processing inputs and outputs, microfilms, microfiches, statements for services, resolutions, financial statements, governmental records, business records, personnel records, work orders, pleadings, discovery in any form, affidavits, motions, responses to discovery, all transcripts,

administrative filings and all mechanical, magnetic, photographic and electronic records or recordings of any kind, including any storage media associated with computers, including, but not limited to, information on hard drives, floppy disks, backup tapes, and zip drives, electronic communications, including but not limited to, the Internet and shall include any drafts or revisions pertaining to any of the foregoing, all other things similar to any of the foregoing, however denominated by Saab, any other data compilations from which information can be obtained, translated if necessary, into a usable form and any other documents. For purposes of this request, any document which contains any note, comment, addition, deletion, insertion, annotation, or otherwise comprises a non-identical copy of another document shall be treated as a separate document subject to production. In all cases where original and any non-identical copies are not available, "document(s)" also means any identical copies of the original and all non-identical copies thereof. Any document, record, graph, chart, film or photograph originally produced in color must be provided in color. Furnish all documents whether verified by Saab or not. If a document is not in the English language, provide both the original document and an English translation of the document.

- **Other Terms:** To the extent that they are used in these information requests, the terms "claim," "consumer complaint," "dealer field report," "field report," "fire," "fleet," "good will," "make," "model," "model year," "notice," "property damage," "property damage claim," "rollover," "type," "warranty," "warranty adjustment," and "warranty claim," whether used in singular or in plural form, have the same meaning as found in 49 CFR 579.4.

In order for my staff to evaluate the alleged defect, certain information is required. Pursuant to 49 U.S.C. § 30166, please provide numbered responses to the following information requests. Insofar as Saab has previously provided a document to ODI, Saab may produce it again or identify the document, the document submission to ODI in which it was included and the precise location in that submission where the document is located. When documents are produced, the documents shall be produced in an identified, organized manner that corresponds with the organization of this information request letter (including all individual requests and subparts). When documents are produced and the documents would not, standing alone, be self-explanatory, the production of documents shall be supplemented and accompanied by explanation.

Please repeat the applicable request verbatim above each response. After Saab's response to each request, identify the source of the information and indicate the last date the information was gathered.

1. State, by model, transmission type (automatic or manual), and engine, the number of subject vehicles Saab has manufactured for sale or lease in the United States. Separately, for each subject vehicle manufactured to date by Saab, state the following:
  - a. Vehicle identification number (VIN);
  - b. Make;
  - c. Model;
  - d. Transmission type;

- c. Engine;
- f. Model Year;
- g. Date of manufacture;
- h. Date warranty coverage commenced; and
- i. The State in the United States where the vehicle was originally sold or leased (or delivered for sale or lease).

Provide the table in Microsoft Access 2000, or a compatible format, entitled "PRODUCTION DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

2. State the number of each of the following, received by Saab, or of which Saab are otherwise aware, which relate to, or may relate to, the alleged defect in the subject vehicles:
  - a. Consumer complaints, including those from fleet operators;
  - b. Field reports, including dealer field reports;
  - c. Reports involving a crash, injury, or fatality, based on claims against the manufacturer involving a death or injury, notices received by the manufacturer alleging or proving that a death or injury was caused by a possible defect in a subject vehicle, property damage claims, consumer complaints, or field reports;
  - d. Reports involving a fire, based on claims against the manufacturer involving a death or injury, notices received by the manufacturer alleging or proving that a death or injury was caused by a possible defect in a subject vehicle, property damage claims, consumer complaints, or field reports;
  - e. Property damage claims; and
  - f. Third-party arbitration proceedings where Saab is or was a party to the arbitration; and
  - g. Lawsuits, both pending and closed, in which Saab is or was a defendant or codefendant.

For subparts "a" through "d, / e," state the total number of each item (e.g., consumer complaints, field reports, etc.) separately. Multiple incidents involving the same vehicle are to be counted separately. Multiple reports of the same incident are also to be counted separately (i.e., a consumer complaint and a field report involving the same incident in which a crash occurred are to be counted as a crash report, a field report and a consumer complaint).

In addition, for items "c" through "d/e/f/g," provide a summary description of the alleged problem and causal and contributing factors and Saab's assessment of the problem, with a summary of the significant underlying facts and evidence. For items f and g, identify the parties to the action, as well as the caption, court, docket number, and date on which the complaint or other document initiating the action was filed.

3. Separately, for each item (complaint, report, claim, notice, or matter) within the scope of your response to Request No. 2, state the following information:
  - a. Saab's file number or other identifier used;
  - b. The category of the item, as identified in Request No. 2 (i.e., consumer complaint, field report, etc.);
  - c. Vehicle owner or fleet name (and fleet contact person), address, and telephone number;
  - d. Vehicle's VIN;

- e. Vehicle's make, model and model year;
- f. Vehicle's mileage at time of incident;
- g. Incident date;
- h. Report or claim date;
- i. Whether a crash is alleged;
- j. Whether property damage is alleged;
- k. Number of alleged injuries, if any;
- l. Number of alleged fatalities, if any; and
- m. State if the vehicle was disabled or towed.

Provide this information in Microsoft Access 2000, or a compatible format, entitled "REQUEST NUMBER TWO DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

4. Produce copies of all documents related to each item within the scope of Request No. 2. Organize the documents separately by category (i.e., consumer complaints, field reports, etc.) and describe the method Saab used for organizing the documents.
5. State, by model and model year, a total count for all of the following categories of claims, collectively, that have been paid by Saab to date that relate to, or may relate to, the alleged defect in the subject vehicles: warranty claims; extended warranty claims; claims for good will services that were provided; field, zone, or similar adjustments and reimbursements; and warranty claims or repairs made in accordance with a procedure specified in a technical service bulletin or customer satisfaction campaign.

Separately, for each such claim, state the following information:

- a. Saab's claim number;
- b. Vehicle owner or fleet name (and fleet contact person) and telephone number;
- c. VIN;
- d. Repair date;
- e. Vehicle mileage at time of repair;
- f. Repairing dealer's or facility's name, telephone number, city and state or ZIP code;
- g. Labor operation number;
- h. Problem code;
- i. Whether the repairs included a towing charge (yes or no);
- j. Replacement part number(s) and description(s);
- k. Concern stated by customer; and
- l. Comment, if any, by dealer/technician relating to claim and/or repair.

Provide this information in Microsoft Access 2000, or a compatible format, entitled "WARRANTY DATA." See Enclosure 1, Data Collection Disc, for a pre-formatted table which provides further details regarding this submission.

6. Describe in detail the search criteria used by Saab to identify the claims identified in response to Request No. 5, including the labor operations, problem codes, part numbers and any other pertinent parameters used. Provide a list of all labor operations, labor operation

descriptions, problem codes, and problem code descriptions applicable to the alleged defect in the subject vehicles. State, by make and model year, the terms of the new vehicle warranty coverage offered by Saab on the subject vehicles (i.e., the number of months and mileage for which coverage is provided and the vehicle systems that are covered). Describe any extended warranty coverage option(s) that Saab offered for the subject vehicles and state by option, model, and model year, the number of vehicles that are covered under each such extended warranty.

7. Produce copies of all service, warranty, and other documents that relate to, or may relate to, the alleged defect in the subject vehicles, that Saab has issued to any dealers, regional or zone offices, field offices, fleet purchasers, or other entities. This includes, but is not limited to, bulletins, advisories, informational documents, training documents, or other documents or communications, with the exception of standard shop manuals. Also include the latest draft copy of any communication that Saab is planning to issue within the next 120 days.
8. Describe all assessments, analyses, tests, test results, studies, surveys, simulations, investigations, inquiries and/or evaluations (collectively, "actions") that relate to, or may relate to, the alleged defect in the subject vehicles that have been conducted, are being conducted, are planned, or are being planned by, or for, Saab. For each such action, provide the following information:
  - a. Action title or identifier;
  - b. The actual or planned start date;
  - c. The actual or expected end date;
  - d. Brief summary of the subject and objective of the action;
  - e. Engineering group(s)/supplier(s) responsible for designing and for conducting the action; and
  - f. A brief summary of the findings and/or conclusions resulting from the action.

For each action identified, provide copies of all documents related to the action, regardless of whether the documents are in interim, draft, or final form. Organize the documents chronologically by action.

9. Describe all modifications or changes made by, or on behalf of, Saab in the design, material composition, manufacture, quality control, supply, or installation of the subject component, from the start of production to date, which relate to, or may relate to, the alleged defect in the subject vehicles. For each such modification or change, provide the following information:
  - a. The date or approximate date on which the modification or change was incorporated into vehicle production;
  - b. A detailed description of the modification or change;
  - c. The reason(s) for the modification or change;
  - d. The part numbers (service and engineering) of the original component;
  - e. The part number (service and engineering) of the modified component;
  - f. Whether the original unmodified component was withdrawn from production and/or sale, and if so, when;
  - g. When the modified component was made available as a service component; and

- h. Whether the modified component can be interchanged with earlier production components.

Also, provide the above information for any modification or change that Saab is aware of which may be incorporated into vehicle production within the next 120 days.

10. Separately state the criteria used by Saab and by GM to decide when to conduct a field action to address a condition that could result in engine stall and also the criteria used to decide whether to conduct the campaign as a Safety Recall or as a Customer Satisfaction Campaign, or similar program. State whether any of these criteria have changed over the last ten years and, if so, explain how and state the reasons for the change(s).
11. Provide an electronic listing of all engine stalling related Safety Recalls and Customer Satisfaction Campaigns, or similar programs, which have been conducted by Saab and by General Motors Corporation in the last ten years. Include the following information in the list:
  - a. The campaign number;
  - b. The date of the campaign;
  - c. The manufacturer (Saab or GM);
  - d. The affect vehicles by make, model, model year, and any other relevant characteristic (e.g., engine, transmission, etc.);
  - e. The affected vehicle population;
  - f. A brief description of the defect condition;
  - g. Whether the condition could occur during throttle tip-in;
  - h. A brief description of the remedy; and
  - i. A short explanation of the reasons for conducting each action as either a Safety Recall or as a Customer Satisfaction Campaign.
12. Furnish Saab's assessment of the alleged defect in the subject vehicle, including:
  - a. The causal or contributory factor(s);
  - b. The failure mechanism(s);
  - c. The failure mode(s);
  - d. The risk to motor vehicle safety that it poses;
  - e. The reports included with this inquiry.

This letter is being sent to Saab pursuant to 49 U.S.C. § 30166, which authorizes NHTSA to conduct any investigation that may be necessary to enforce Chapter 301 of Title 49 and to request reports and the production of things. It constitutes a new request for information. Saab's failure to respond promptly and fully to this letter could subject Saab to civil penalties pursuant to 49 U.S.C. § 30165 or lead to an action for injunctive relief pursuant to 49 U.S.C. § 30163. (Other remedies and sanctions are available as well.) Please note that maximum civil penalties under 49 U.S.C. § 30165 have increased as a result of the recent enactment of the Transportation Recall Enhancement, Accountability, and Documentation (TREAD) Act, Public Law No. 106-414 (signed November 1, 2000). Section 5(a) of the TREAD Act, codified at 49 U.S.C. § 30165(b), provides for civil penalties of up to \$5,000 per day, with a maximum of \$15 million

for a related series of violations, for failing or refusing to perform an act required under 49 U.S.C. § 30166. This includes failing to respond to ODI information requests.

If Saab cannot respond to any specific request or subpart(s) thereof, please state the reason why it is unable to do so. If on the basis of attorney-client, attorney work product, or other privilege, Saab does not submit one or more requested documents or items of information in response to this information request, Saab must provide a privilege log identifying each document or item withheld, and stating the date, subject or title, the name and position of the person(s) from, and the person(s) to whom it was sent, and the name and position of any other recipient (to include all carbon copies or blind carbon copies), the nature of that information or material, and the basis for the claim of privilege and why that privilege applies.

Saab's response to this letter, in duplicate, together with a copy of any confidentiality request, must be submitted to this office by March 12, 2004. Please refer to PE03-059 in Saab's response to this letter. If Saab finds that it is unable to provide all of the information requested within the time allotted, Saab must request an extension from me at (202) 366-5207 no later than five business days before the response due date. If Saab is unable to provide all of the information requested by the original deadline, it must submit a partial response by the original deadline with whatever information Saab then has available, even if an extension has been granted.

If Saab claims that any of the information or documents provided in response to this information request constitute confidential commercial material within the meaning of 5 U.S.C. § 552(b)(4), or are protected from disclosure pursuant to 18 U.S.C. § 1905, Saab must submit supporting information together with the materials that are the subject of the confidentiality request, in accordance with 49 CFR Part 512, as amended (68 Fed. Reg. 44209 et seq; July 28, 2003), to the Office of Chief Counsel (NCC-113), National Highway Traffic Safety Administration, Room 5219, 400 Seventh Street, S.W., Washington, D.C. 20590. Saab is required to submit two copies of the documents containing allegedly confidential information (except only one copy of blueprints) and one copy of the documents from which information claimed to be confidential has been deleted.



If you have any technical questions concerning this matter, please call Peter Kivett of my staff at (202) 366-6178.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jeffrey L. Qandt', with a stylized flourish at the end.

Jeffrey L. Qandt, Chief  
Vehicle Control Division  
Office of Defects Investigation

- Enclosure 1: One CD ROM titled Data Collection Disc containing three files
- Enclosure 2: Twenty-Two Vehicle Owner's Questionnaires
- Enclosure 3: E-mail Correspondence from Gay P. Kent dated, January 16, 2004

## Demeter, Kathleen

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**From:** gay.p.kent@gm.com  
**Sent:** Friday, January 16, 2004 5:32 PM  
**To:** Demeter, Kathleen  
**Subject:** Saab 9-3, Follow up to our conversation 15/JA04

Dear Kathy,

When we spoke yesterday I indicated that Saab and GM decided to conduct a global Customer Satisfaction Campaign to address a potential stall condition on 2003 model year Saab 9-3 vehicles equipped with automatic transmission and the 2.0 L engine. I also mentioned that we intended to file a Part 579 letter pursuant to the TREAD Act, because at the time that we spoke, I mistakenly believed that a decision had been made to conduct the campaign as a safety recall in Japan. I have since learned that decision has not been made, and a Part 579 letter is not required at this time. If a decision is made in the future to conduct this field action as a safety recall in Japan, we will promptly file the requisite Part 579 notification.

Nevertheless, we still thought it would be helpful to provide a brief description of the conditions that are remedied by the campaign. We intend to provide this same information in a Part 579 letter, if one is required in the future.

**Condition:** Potential stalling issue on 2003 Saab 9-3 vehicles equipped with 2.0 L engine and automatic transmission.

**Vehicle Population:** 12,249 US vehicles

**Correction:** The engine management system is reprogrammed with corrected software.

**Issue:** There are two potential failure modes that might cause vehicles to stall; however, neither failure mode happens during acceleration and in both cases the vehicle can be immediately restarted. As a result, Saab and GM do not consider these conditions to pose an unreasonable risk to motor vehicle safety.

Each potential failure mode is described below:

1. 2.0 L engine with 175 hp and Automatic Transmission:

**Condition:** Engine may stall while releasing gas pedal while cruising or during a stopping situation.

**Root cause and contributory factors:** The root cause is that Dual Mass Flywheel (DMF) protection was incorrectly enabled on vehicles equipped with automatic transmissions. DMFs are installed on manual transmission vehicles, but not on vehicles equipped with automatic transmission (AT). DMF protection was a function intended only for manual transmission vehicles.

The DMF protection detects low engine speed and does not re-enable fuel until the engine has been restarted. For improved driveability, fuel economy and emission purposes, the AT may shift into neutral at low engine speeds (low rpm values) when the gas pedal is quickly and completely released. DMF protection on an AT vehicle may incorrectly interpret this event and respond by turning off fuel. It is also possible for this to occur in a hard brake apply when the transmission is in the manual override mode and 4th or 3rd gear have

been selected. This condition may cause the engine to stall, but it can be immediately restarted.

2. 2.0 L engine with 210 hp and AT:

Condition: Engine may oscillate and stall on "aborted take off."

Root cause and contributory factors: The root cause is a mismatch between the three engine RPM controlling functions; tip in/out governor, idle governor and dynamic fuel governor.

When standing still (0 mph), with the gear selector in Drive and engine at idle, if the accelerator is depressed and quickly released (situation called "Aborted Take-off"), the engine speed may start to oscillate, sometimes causing the engine to stall due to a software fault in the Engine Management System. The condition is more likely to occur in an engine that is not fully warmed up, and the typical driving condition is a short drive cycle in a slow moving queue. While this condition may cause the engine to stall, it can be immediately restarted.

Please contact me through Terri Amato at 586-986-8025 until my mailbox is established on -8029 if you have any other questions.

Regards,

Gay Kent  
Director of Product Investigations  
General Motors Corporation  
586-986-8029



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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

21-APR-2003

Repository ☐Reference No.  
10016251**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 1 / 1

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Y53FB49S531015343

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased  
08-MAY-03Dealer's Name and Telephone Number  
SEWELL SAAB 2143502000Engine  
No: Cylinders 4Fuel Type:  
GasOriginal Owner  
☒Dealer's City  
DALLASState  
TXZip Code  
75209

Transmission Type

AUTOMATIC

☒ Antilock Brakes☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
16-APR-2003Failure Mileage  
1100Failure Speed  
8**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM4SABC0361)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

N

Narrative Description of Lockout(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to this failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

MY BRAND NEW 2003 SAAB 9-3 WITH 1100 MILES ON IT, FAILED ME.

I WAS IN THE MIDDLE OF MAKING A RIGHT TURN IN RUSH HOUR TRAFFIC, AND MY ENGINE QUIT - THE ENGINE LIGHT CAME ON, POWER STEERING AND POWER BRAKES WERE OFF SO IT MADE THE CAR INCREDIBLY HEAVY TO TURN. I WAS ABLE TO COAST INTO A PARKING LOT WITHOUT GETTING HIT, BUT IT WAS STILL TERRIFYING. I TURNED THE KEY OFF, AND STARTED THE CAR RIGHT BACK UP, DROVE IT TO THE DEALERSHIP A MILE AWAY WHERE IT'S BEEN AWAITING A "SOFTWARE UPGRADE" FOR 5 DAYS.

ON WWW.EDMUNDS.COM I FOUND THAT SEVERAL OWNERS OF 2003 SAAB 9-3S HAVE EXPERIENCED THE SAME THING. HOW DANGEROUS! \*JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to a 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.



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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

30-APR-2003

Repository ☐

Reference No.

10016784

**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date: / /

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make SAAB	Model 9-3	Model Year 2003
Date Purchased 02-APR-03	Dealer's Name and Telephone Number		Engine: No. Cylinders 4	Fuel Type: Gas
Original Owner <input checked="" type="checkbox"/>	Dealer's City		State	Zip Code
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain FRONT WHEEL DRIVE	Vehicle Component Code 06000 ENGINE AND ENGINE COOLING	
Multiple Failure:				

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

Incident Date(s) 30-APR-2003	Failure Mileage 1800	Failure Speed 30
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**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTM19A6C036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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Narrative Description of Incident(s), Crash(es), and Injury(es).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

I JUST BOUGHT A 2003 SAAB 9-3 ABOUT A MONTH AGO AND IT HAS APPROX. 1800 MILES ON IT. I WAS DRIVING HOME FROM WORK AND SUDDENLY LOST POWER STEERING FOLLOWED BY COMPLETE POWER. LUCKILY I WAS ON A BACK ROAD AND PULLED OVER SAFELY. IF I HAD BEEN ON THE HIGHWAY THERE MAY HAVE BEEN A DIFFERENT OUTCOME. I FEEL THAT THIS IS A VERY BIG SAFETY ISSUE.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

01-MAY-2003

Repository ☐Reference No.  
10016852**OWNER INFORMATION (Type or Print)**Name **[REDACTED]**Address **[REDACTED]**City **[REDACTED]**State **[REDACTED]**Zip Code **[REDACTED]**

Daytime Telephone Number

**[REDACTED]**

Evening Telephone Number

**[REDACTED]**

E-mail Address

**[REDACTED]****[REDACTED]**Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner **[REDACTED]** Date **[REDACTED]****VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased  
01-MAR-03Dealer's Name and Telephone Number  
KUNI SAAB 1 (800) 328-KUNIEngine:  
Max Cylinders 4Fuel Type:  
GasOriginal Owner  
☒Dealer's City  
BEAVERTONState  
ORZip Code  
97005Transmission Type  
MANUAL☒ AntiLock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVEVehicle Component Code  
060000 ENGINE AND ENGINE COOLING

Multiple Failure: 4

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
29-MAR-2003Failure Mileage  
31Failure Speed  
35**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

ENGINE STALLS WHILE STOPPING OR COASTING TO INTERSECTIONS. 4 INCIDENTS OF THIS TO DATE AND VEHICLE HAS UNDER 2000 MILES. DEALER SERVICE HAS TWICE SAID THEY FOUND NO PROBLEMS AND THERE IS NO SOFTWARE OR UPDATES TO ADDRESS THE PROBLEM. RUNNING RECOMMENDED OCTANE FUEL (PREMIUM).

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

01-MAY-2003

Repository ☐Reference No.  
10016863

## OWNER INFORMATION (Type or Print)

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date / /

## VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased  
10-MAR-03

Dealer's Name and Telephone Number

Engine:

No. Cylinders 4

Fuel Type:

Gas

Original Owner

☒

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes☒ Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure:

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

Incident Date(s)

28-APR-2003

Failure Mileage

1912

Failure Speed

35

## ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM159ABC036)

☐ Original Equipment  
☒ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

## ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

## APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No☐ Yes ☒ No

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).


Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

VEHICLE STALLED WHILE ACCELERATING. LOST POWER STEERING AND POWER BRAKE ASSIST. COULD HAVE EASILY CAUSED AN ACCIDENT IF I HADN'T BEEN ABLE TO STOP SAFELY. THE CAR STARTED WITH NO ISSUES AFTER THE STOP.


Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.


ATTACH ADDITIONAL SHEETS IF NECESSARY.

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 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148	
		Date Received 07-MAY-2003	Repository <input type="checkbox"/> Reference No. 10018394
<b>OWNER INFORMATION (Type or Print)</b>			
Name _____		Daytime Telephone Number _____	
Address _____		E-mail Address _____	
City _____	State _____	Zip Code _____	Evening Telephone Number _____
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Signature of Owner _____ Date _____/_____/_____			
<b>VEHICLE INFORMATION</b>			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side YS3FB49S031011751		Make SAAB	Model 9-3
Date Purchased 01-JAN-03	Dealer's Name and Telephone Number WEST COUNTY SAAB 5362278303		Model Year 2003
Original Owner <input checked="" type="checkbox"/>	Dealer's City MANCHESTER	State MO	Zip Code 63011
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain FRONT WHEEL DRIVE	Engine: No. Cylinders 4
		Vehicle Component Code 110000 ELECTRICAL SYSTEM	Fuel Type: Gas
		Multiple Failure: 1	
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Incident Date(s) 26-MAR-2003	Failure Mileage 6000	Failure Speed 20	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>			
The Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)
DOT No. (Example: DOTM19A8C036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:	
Tire Component Code		Tire Failure Type	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>			
Make:	Date Manufactured:	Model No./Name:	
Seat Type:	Installation System:		
Child Seat Component Code:	Failed Part:		
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)			
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 Deaths 0
		Reported to Police N	
Narrative Description of Incident(s), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).			
AFTER SLOWING DOWN IN TRAFFIC, MY WIFE ATTEMPTED TO ACCELERATE, BUT THE ENGINE STOPPED AND THE ENGINE ICON ON THE DASH DISPLAY WAS ILLUMINATED. THE SAAB INFORMATION DISPLAY (SID) DID NOT SHOW ANY PROBLEMS. LUCKILY SHE WAS ABLE TO RESTART AND CONTINUE ON TO WORK. APPROXIMATELY 25 MILES LATER THE ENGINE WAS SLUGGISH AND ALMOST STOPPED AGAIN. IN ADDITION THE RADIO HAS BEEN KNOWN TO CHANGE STATIONS BY ITSELF, AND THE REMOTE MIRRORS WILL SOMETIMES MOVE BY THEMSELVES. THE CAR HAS BEEN TAKEN TO THE SAAB DEALER AND A SOFTWARE UPDATE HAS SUPPOSEDLY TAKEN CARE OF THE MIRRORS AND ENGINE/IGNITION, BUT THE RADIO PROBLEM IS NEW. IT WOULD HAVE BEEN NICE IF SAAB HAD BEEN PROACTIVE AND SOUGHT OUT OWNERS OF THIS PARTICULAR MODEL (9-3 LINEAR) SOONER AND NOTIFIED THEM OF A NECESSARY SOFTWARE UPDATE. AN ENGINE DYING IN TRAFFIC, AN INTERSECTION, A TRAIN CROSSING, ETC., CAN BE A DANGER. ALSO, I'M STILL WAITING FOR THE ONSTAR SERVICE TO BE INSTALLED. WE PURCHASED THE CAR THE FIRST WEEK IN JANUARY, AND NOW IT'S MAY AND STILL NO ONSTAR! *JB			
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.			
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> <b>National Highway Traffic Safety Administration</b>		<b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: <a href="http://www.nhtsa.dot.gov/hotline">www.nhtsa.dot.gov/hotline</a>		<b>FOR AGENCY USE ONLY 100148</b>	
		Date Received [REDACTED]	Repository <input type="checkbox"/> Reference No. 10018394		
<b>OWNER INFORMATION (Type or Print)</b>				Daytime Telephone Number [REDACTED]	
Name [REDACTED]				E-mail Address [REDACTED]	
Address [REDACTED]				Evening Telephone Number [REDACTED]	
City [REDACTED]		State [REDACTED]	Zip Code [REDACTED]		
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side YS3FB49S031011751			Make SAAB	Model 9-3	Model Year 2003
Date Purchased 01-JAN-03	Dealer's Name and Telephone Number WEST COUNTY SAAB 6362278303			Engine: No. Cylinders 4	Fuel Type: Gas
Original Owner <input checked="" type="checkbox"/>	Dealer's City MANCHESTER		State MO	Zip Code 63011	
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain FRONT WHEEL DRIVE		Vehicle Component Code 110000 ELECTRICAL SYSTEM	
Multiple Failure: 1					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Incident Date(s) 26-MAR-2003	Failure Mileage 6000	Failure Speed 20			
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOT4ALSABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:		
Tire Component Code				Tire Failure Type	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)					
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 Deaths 0	Reported to Police N	
Narrative Description of Incident(s), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure. (e.g., parts repaired or replaced (and if old part is available)).					
AFTER SLOWING DOWN IN TRAFFIC, MY WIFE ATTEMPTED TO ACCELERATE, BUT THE ENGINE STOPPED AND THE ENGINE ICON ON THE DASH DISPLAY WAS ILLUMINATED. THE SAAB INFORMATION DISPLAY (SID) DID NOT SHOW ANY PROBLEMS. LUCKILY SHE WAS ABLE TO RESTART AND CONTINUE ON TO WORK. APPROXIMATELY 25 MILES LATER THE ENGINE WAS SLUGGISH AND ALMOST STOPPED AGAIN. IN ADDITION THE RADIO HAS BEEN KNOWN TO CHANGE STATIONS BY ITSELF, AND THE REMOTE MIRRORS WILL SOMETIMES MOVE BY THEMSELVES. THE CAR HAS BEEN TAKEN TO THE SAAB DEALER AND A SOFTWARE UPDATE HAS SUPPOSEDLY TAKEN CARE OF THE MIRRORS AND ENGINE/IGNITION, BUT THE RADIO PROBLEM IS NEW. IT WOULD HAVE BEEN NICE IF SAAB HAD BEEN PROACTIVE AND SOLICIT OUT OWNERS OF THIS PARTICULAR MODEL (9-3 LINEAR) SOONER AND NOTIFIED THEM OF A NECESSARY SOFTWARE UPDATE. AN ENGINE DYING IN TRAFFIC, AN INTERSECTION, A TRAIN CROSSING, ETC., CAN BE A DANGER. ALSO, I'M STILL WAITING FOR THE ONSTAR SERVICE TO BE INSTALLED. WE PURCHASED THE CAR THE FIRST WEEK IN JANUARY, AND NOW IT'S MAY AND STILL NO ONSTAR! *JB					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY</b>					
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 <b>U.S. Department of Transportation</b> <b>National Highway Traffic Safety Administration</b>		<b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET: www.nhtsa.dot.gov/hotline</b>		<b>FOR AGENCY USE ONLY 100148</b>	
		<b>Date Received</b>  19-MAY-2003	<b>Repository</b> <input type="checkbox"/>  <b>Reference No.</b> 10018928		
<b>OWNER INFORMATION (Type or Print)</b>				<b>Daytime Telephone Number</b> [REDACTED]	<b>E-mail Address</b> [REDACTED]
<b>Name</b> [REDACTED]				<b>Evening Telephone Number</b> [REDACTED]	
<b>Address</b> [REDACTED]					
<b>City</b> [REDACTED]		<b>State</b> [REDACTED]	<b>Zip Code</b> [REDACTED]		
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
<b>Signature of Owner</b> _____ <b>Date</b> ____/____/____					
<b>VEHICLE INFORMATION</b>					
<b>17 digit Vehicle Identification Number located at bottom of windshield on driver's side:</b> YS3F849S231005207			<b>Make</b> SAAB	<b>Model</b> 9-3	<b>Model Year</b> 2003
<b>Date Purchased</b> 09-JAN-03	<b>Dealer's Name and Telephone Number</b>			<b>Engine:</b> No: Cylinders 4	<b>Fuel Type:</b> Gas
<b>Original Owner</b> <input checked="" type="checkbox"/>	<b>Dealer's City</b>	<b>State</b>	<b>Zip Code</b>		
<b>Transmission Type</b> AUTOMATIC	<input checked="" type="checkbox"/> <b>Antilock Brakes</b> <input checked="" type="checkbox"/> <b>Cruise Control</b>	<b>Powertrain</b> FRONT WHEEL DRIVE	<b>Vehicle Component Code</b> 061000 ENGINE AND ENGINE COOLING: ENGINE <b>Multiple Failure:</b> 0		
<b>FAILED COMPONENT(S) / PART(S) INFORMATION</b>					
<b>Incident Date(s)</b> 17-MAY-2003	<b>Failure Mileage</b> 4840	<b>Failure Speed</b> 40			
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
<b>Tire Make</b>		<b>Tire Model (Name or Number)</b>		<b>Tire Size (Example P215/65R15)</b>	
<b>DOT No. (Example: DOTM4SABC036)</b>		<input type="checkbox"/> <b>Original Equipment</b> <input type="checkbox"/> <b>Prior Repair</b>	<b>Failure Location:</b>		
<b>Tire Component Code</b>				<b>Tire Failure Type</b>	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
<b>Make:</b>		<b>Date Manufactured:</b>		<b>Model No./Name:</b>	
<b>Seat Type:</b>		<b>Installation System:</b>			
<b>Child-Seat Component Code:</b>		<b>Failed Part:</b>			
<b>APPLICABLE INCIDENT INFORMATION</b>					
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)					
<b>Crash</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Fire</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Number of Persons Injured</b> 0	<b>Number of Deaths</b> 0	<b>Reported to Police</b> N	
<b>Narrative Description of Incident(s), Crash(es), and Injury(ies).</b> Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).					
MY 2003 SAAB 9-3 HAD INTERMITTENT STALLING AND LOSS OF POWER ISSUES. SINCE DELIVERY ON 1/09/2003, THE CAR HAS STALLED 4 TIMES AND LOST POWER TWICE. I HAVE BEEN IN CONTACT WITH THE DEALERSHIP AND SAAB AND THE PROBLEM HAS NOT BEEN RESOLVED. ON 5/13/03 NEW ENGINE MANAGEMENT FIRM WARE WAS INSTALLED. ON 5/17/03 THE CAR AGAIN MALFUNCTIONED. THERE APPEARS TO BE A SERIOUS ISSUE WITH THE VEHICLE THAT SAAB IS NOT ABLE TO RESOLVE. *JB					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.					
ATTACH ADDITIONAL SHEETS IF NECESSARY					
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.					



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

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**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

06-JUL-2003

Repository ☐Reference No.  
10025470**OWNER INFORMATION (Type or Print)**Name **XXXXXXXXXX**Address **XXXXXXXXXX**City **XXXXXXXXXX**State **XX**Zip Code **XXXXXX**

Daytime Telephone Number

**XXXXXXXXXX**

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
YS3FB49S931011926Make  
SAABModel  
9-3Model Year  
2003Date Purchased  
24-DEC-02

Dealer's Name and Telephone Number

Engine:  
No: Cylinders 4Fuel Type:  
GasOriginal Owner  
☒

Dealer's City

State

Zip Code

Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVE

Vehicle Component Code

072100 FUEL SYSTEM, GASOLINE:DELIVERY:FUEL PUMP

Multiple Failure: 3

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
04-JUL-2003Failure Mileage  
6100Failure Speed  
35**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABCD36)

☐ Original Equipment  
Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash:

☐ Yes ☒ No

Fire:

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(es).


Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).


I OWNS A 2003 SAAB 1993 LINEAR WITH AUTOMATIC. WHEN DRIVING A CAR, CAR STALLED MIDDLE OF THE ROAD. IT HAPPEND 3 TIMES SO FAR. CAR STALLED AND HANDLE GOT LOCKED UP. ENGINE LIGHT CAME UP. IT WAS DANGEROUS ESPECIALLY AT THE FREEWAY. LUCKILY NEVER RESULTED IN BIG ACCIDENTS. DEALER ARE SAYING IT'S COMPUTER PROBLEM, BUT SOME PEOPLE SAID IT MIGHT BE THE FAULTY FUEL PUMP. \*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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 <b>U.S. Department of Transportation</b> <b>National Highway Traffic Safety Administration</b>		<b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET: www.nhtsa.dot.gov/hotline</b>		<b>FOR AGENCY USE ONLY 100148</b>	
		<b>Date Received</b>  23-JUL-2003	<b>Repository</b> <input type="checkbox"/>  <b>Reference No.</b> 10028926		
<b>OWNER INFORMATION (Type or Print)</b>				<b>Daytime Telephone Number</b> [REDACTED]	<b>E-mail Address</b> [REDACTED]
<b>Name</b> [REDACTED]				<b>Evening Telephone Number</b> [REDACTED]	
<b>Address</b> [REDACTED]					
<b>City</b> [REDACTED]		<b>State</b> [REDACTED]	<b>Zip Code</b> [REDACTED]		
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Signature of Owner _____ Date: 7/23/03					
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side YS3FDM9SL131012326			<b>Make</b> SAAB	<b>Model</b> 9-3	<b>Model Year</b> 2003
<b>Date Purchased</b> 05-DEC-02	<b>Dealer's Name and Telephone Number</b>			<b>Engine:</b> No. Cylinders 4	<b>Fuel Type:</b> Gas
<b>Original Owner</b> <input checked="" type="checkbox"/>	<b>Dealer's City</b>		<b>State</b>	<b>Zip Code</b>	
<b>Transmission Type</b> AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	<b>Powertrain</b> FRONT WHEEL DRIVE		<b>Vehicle Component Code</b> 061000 ENGINE AND ENGINE COOLING: ENGINE	
<b>Multiple Failure:</b> 1					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
<b>Incident Date(s)</b> 22-JUL-2003	<b>Failure Mileage</b> 3100	<b>Failure Speed</b> 25			
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
<b>Tire Make</b>		<b>Tire Model (Name or Number)</b>		<b>Tire Size (Example: P215/65R15)</b>	
<b>DOT No. (Example: DOTM4L9ABC036)</b>		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		<b>Failure Location:</b>	
<b>Tire Component Code</b>				<b>Tire Failure Type</b>	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
<b>Make:</b>		<b>Date Manufactured:</b>		<b>Model No./Name:</b>	
<b>Seat Type:</b>		<b>Installation System:</b>			
<b>Child Seat Component Code:</b>		<b>Failed Part:</b>			
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)					
<b>Crash</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Fire</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Number of Persons Injured</b> 0	<b>Number of Deaths</b> 0	<b>Reported to Police</b> N	
<b>Narrative Description of Incident(s), Crash(es), and Injury(ies).</b> Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure, i.e., parts repaired or replaced (and if old part is available).					
MY SAAB 9-3 SS 2003 STALLED TODAY. COMPLETELY LOST E POWER ALSO COULDN'T TURN STEERING WHEEL. LUCKY NOT TO GET HIT FROM BEHIND SINCE I WAS DRIVING IN A RESIDENTIAL AREA. THE CAR STARTED AFTER I TURNED IT BACK ON, THERE WAS NO ERROR MESSAGES, ONLY THE ENGINE LIGHT CAME ON WHILE THE PROBLEM HAPPENED. AN OCCURANCE LIKE THIS IN THE FREEWAY WOULD HAVE BEEN CATASTROPHIC. FROM VARIOUS INTERNET FORUMS I HAVE READ OWNERS OF THE SAME TYPE OF VEHICLE HAVING SIMILAR PROBLEM. NHTSA WILL NEED TO TAKE ACTION TO PREVENT INJURIES OR EVEN FATALITIES IN THE FUTURE					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY</b>					
The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to a 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> <b>National Highway Traffic Safety Administration</b>		<b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET: www.nhtsa.dot.gov/hotline</b>		<b>FOR AGENCY USE ONLY 100148</b>	
		<b>Date Received</b>  14-AUG-2003	<b>Repository</b> <input type="checkbox"/>  <b>Reference No.</b> 10032848		
<b>OWNER INFORMATION (Type or Print)</b>				<b>Daytime Telephone Number</b> [REDACTED]	<b>E-mail Address</b> [REDACTED]
<b>Name</b> [REDACTED]				<b>Evening Telephone Number</b> [REDACTED]	
<b>Address</b> [REDACTED]					
<b>City</b> [REDACTED]		<b>State</b> [REDACTED]	<b>Zip Code</b> [REDACTED]		
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
<b>Signature of Owner</b> _____ <b>Date</b> 8/14/03					
<b>VEHICLE INFORMATION</b>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side			<b>Make</b> SAAB	<b>Model</b> 9-3	<b>Model Year</b> 2003
<b>Date Purchased</b>	<b>Dealer's Name and Telephone Number</b> LEHMAN MOTORS			<b>Engine:</b> No: Cylinders	<b>Fuel Type:</b>
<b>Original Owner</b> <input checked="" type="checkbox"/>	<b>Dealer's City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code</b>	
<b>Transmission Type</b> AUTOMATIC	<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	<b>Powertrain</b>	<b>Vehicle Component Code</b> 061000 ENGINE AND ENGINE COOLING: ENGINE		
<b>Multiple Failure:</b> 4					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
<b>Incident Date(s)</b> 14-AUG-2003	<b>Failure Mileage</b>	<b>Failure Speed</b>			
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
<b>Tire Make</b>		<b>Tire Model (Name or Number)</b>		<b>Tire Size (Example P215/65R15)</b>	
<b>DOT No. (Example: DOTM19A8C036)</b>		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	<b>Failure Location:</b>		
<b>Tire Component Code</b>				<b>Tire Failure Type</b>	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
<b>Make:</b>		<b>Date Manufactured:</b>		<b>Model No./Name:</b>	
<b>Seat Type:</b>		<b>Installation System:</b>			
<b>Child Seat Component Code:</b>		<b>Failed Part:</b>			
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)					
<b>Crash</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Fire</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Number of Persons Injured</b>	<b>Number of Deaths</b>	<b>Reported to Police</b> N	
<b>Narrative Description of Incident(s), Crash(es), and Injury(ies).</b> Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure (i.e., parts repaired or replaced (and if old part is available)).					
I HAVE A 2003 SAAB 9-3 LINEAR. I HAVE HAD THE CAR STALL ON ME IN TRAFFIC 4 TIMES NOW OVER THE LAST 4 MONTHS. I NOW REALIZE I'M FAR FROM THE ONLY ONE THIS HAS HAPPENED TO. THIS IS A VERY DANGEROUS SITUATION AS I HAVE BEEN IN HIGHWAY TRAFFIC 3 OF THE 4 TIMES. LUCKILY IN THE OUTSIDE LANE AND ABLE TO PULL OFF. I HAVE AUTOMATIC TRANSMISSION AND RUN HIGH OCTANCE FUEL (RECOMMENDED). HOPEFULLY SOMETHING CAN BE DONE TO PRESS GM AND FORCE THEM TO FIX THIS PROBLEM. *AK					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY.</b>					
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 an administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					



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

**DOT Auto Safety Hotline**  
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To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

20-AUG-2003

Repository ☐Reference No.  
10033177**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date / /

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
Y53FB49S031015380

Make  
SAABModel  
9-3Model Year  
2003Date Purchased  
24-FEB-03Dealer's Name and Telephone Number  
ZUMBACH SPORT CARS 212-247-1444Engine:  
No: Cylinders 4Fuel Type:  
GasOriginal Owner  
☒Dealer's City  
NEW YORKState  
NYZip Code  
10019Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise ControlPowertrain  
REAR WHEEL DRIVEVehicle Component Code  
110000 ELECTRICAL SYSTEM

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
20-AUG-2003Failure Mileage  
5000

Failure Speed

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: D07MA19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

I PICKED UP MY CAR ON FEBRUARY 24, 2003 AT NIGHT. THE NEXT MORNING I WAS TESTING THE CD PLAYER IN THE CAR AND IT WOULDN'T WORK. SO I BROUGHT BACK THE CAR FOR THE FIRST TIME. THEY SAID THEY HAD TO FIX SOMETHING WITH THE COMPUTER. ABOUT 1 MONTH LATER MY WIFE WAS DRIVING MY 2 MONTH OLD SON AND THE CAR STALLED IN THE MIDDLE OF THE HIGHWAY. WHILE I WAS TRYING TO BRING IT INTO SAAB IT STALLED ANOTHER 2 TIMES. THEY SAID THEY HAVE TO REPLACE SOME COMPUTER. ABOUT 1 MONTH LATER I STARTED NOTICING THAT I WAS HAVING SERIOUS PICKUP ISSUES. FOR EXAMPLE, IF I WAS ACCELERATING AFTER A RED LIGHT I COULD HIT THE GAS AS HARD AS POSSIBLE AND I STILL WOULDN'T MOVE FOR A SOLID 2 SECONDS. THIS ALMOST BECAME DISASTROUS WHEN A TRUCK NEARLY HIT ME BECAUSE I COULDN'T MOVE THE CAR. AGAIN I BROUGHT THE CAR IN AND AGAIN THEY REPLACED SOME COMPUTER. THIS TIME THEY SAID IT WAS AN ISSUE WITH THE FUEL INJECTOR SO THEY REPLACED THE ENTIRE COMPUTER. NOW ABOUT 2 WEEKS LATER THE CAR SEEMS TO BE HAVING THE FIRST STAGES OF THE SAME PROBLEM. I'M TRYING TO GET OUT OF MY LEASE BUT SAAB SAYS THEY BELIEVE MY CAR IS FIXED. \*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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U.S. Department  
of TransportationNational Highway  
Traffic Safety  
Administration

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
 To Report Vehicle Safety Defects  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

12-OCT-2003

Repository ☐Reference No.  
10041666**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
 In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
 Signature of Owner \_\_\_\_\_ Date 10/1/03

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make  
SAABModel  
9-3Model Year  
2003Date Purchased  
20-JUL-03Dealer's Name and Telephone Number  
CENTRAL SAAB 7817628100Engine:  
No. Cylinders 4Fuel Type:  
GasOriginal Owner  
☒Dealer's City  
NORWOODState  
MAZip Code  
02062Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVE
 Vehicle Component Code  
 061000 ENGINE AND ENGINE COOLING: ENGINE  
 Multiple Failure: 2
**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
21-JUL-2003Failure Mileage  
50Failure Speed  
2**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury/ies.)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

0

0

N

Narrative Description of Incident(s), Crash(es), and Injury/ies.

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

BRAND NEW 2003 SAAB 9-3 ARC JUST STALLS. MY ENGINE HAS STALLED FOR NO REASON NUMEROUS TIMES. THIS PROBLEM HAS BEEN HAPPENING SINCE THE DAYS AFTER I GOT THE CAR. I HAVE BEEN TO THE DEALERSHIP SEVERAL TIMES TO HAVE THIS PROBLEM CORRECTED, EVERY TIME THEY TELL ME THAT I AM JUST ABOUT MAKING IT UP. THEY CAN NEVER FIND A PROBLEM WITH THE CAR, AND SAAB CORPORATION IS NO HELP. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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U.S. Department  
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National Highway  
Traffic Safety  
Administration

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**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100161

Date Received

08-OCT-2003

Repository ☐Reference No.  
10042589**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date

**VEHICLE INFORMATION**17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
YS3FF49Y131040006Make  
SAABModel  
9-3Model Year  
2003

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. of Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐

Antilock Brakes

Powertrain

Vehicle Component Code

061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure: 1

☒

Cruise Control

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
08-OCT-2003

Failure Mileage

Failure Speed

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No☐ Yes ☒ No

N

Narrative Description of Incident(s), Crash(es), and Injury(es).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

WHILE DRIVING VEHICLE STALLED, AND THE STEERING WHEEL LOCKED. THE CAUSE HAD NOT BEEN DETERMINED. \*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

16-OCT-2003

Repository ☐

Reference No.

10043822

**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date / /

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

VS3FD49Y231057077

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased  
01-JUL-03Dealer's Name and Telephone Number  
EISENHOWER NISSANEngine:  
No. Cylinders

Fuel Type:

Original Owner  
☒Dealer's City  
WERNERSVILLEState  
PA

Zip Code

Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise Control

Powertrain

Vehicle Component Code

103000 POWER TRAIN/AUTOMATIC TRANSMISSION

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
09-OCT-2003

Failure Mileage

Failure Speed

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM4SABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(es).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No☐ Yes ☒ No

0

0

N

Narrative Description of Incident(s), Crash(es), and Injury(es).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

MY 2003 SAAB 9-3 ARC (PURCHASED THIS JULY) WITH AUTOMATIC TRANSMISSION NEARLY STALLED (SPUTTERED, HESITATED AND NEARLY  
LOST POWER) WHILE MAKING A LEFT HAND TURN BETWEEN ONCOMING TRAFFIC. WHILE THIS CAR HAS NOT FULLY STALLED OUT, I HAVE  
FELT IT HESITATED ON A NUMBER OF OTHER OCCASIONS. I OWNED ANOTHER 2003 SAAB, IDENTICAL IN EVERY WAY, THAT COMPLETELY  
STALLED OUT AT IDLE SPEED WHILE STUCK IN TRAFFIC AND ALSO WHILE STARTING OUT IN REVERSE AND IN FORWARD. THE FACT THAT  
THIS NEW CAR NEARLY STALLED IN FRONT OF ONCOMING TRAFFIC HAS REALLY SCARED ME. I HAVE READ A NUMBER OF COMPLAINTS ON  
THE WEB ABOUT STALLING IN THE 2003 SAAB 9-3. I SPOKE TO SAAB CUSTOMER SERVICE YESTERDAY AND THEY DENIED ANY OTHER  
COMPLAINTS ON THE STALLING ISSUE. I AM BRINGING MY CAR TO THE DEALER ON MONDAY, HOWEVER, I FEEL THAT SAAB NEEDS TO  
ADDRESS THIS POTENTIALLY VERY SERIOUS ISSUE. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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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.



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

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**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
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(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

21-OCT-2003

Repository ☐

Reference No.  
10043296

**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased

Dealer's Name and Telephone Number  
CHECKPOINT MOTORS

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

BUFFALO

State

NY

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure: 3

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

Incident Date(s)

17-OCT-2003

Failure Mileage

Failure Speed

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

MY 2003 SAAB 9-3 HAS STALLED 3 TIMES IN TRAFFIC. TOOK IT TO THE DEALER AND THEY CAME UP WITH NOTHING. CAR IS IN SHOP RIGHT NOW AND WILL SEE IF ANYTHING IS FOUND BUT I DOUBT IT. SAAB CUSTOMER CARE IS OBLIVIOUS TO PROBLEM. THIS IS A POTENTIALLY LIFE THREATENING PROBLEM. SEEMS TO HAPPEN WHILE CRUISING IN TRAFFIC AT SPEED UNDER 30 MPH. CAR COMPLETELY LOCKS UP AND WILL NOT START UNTIL PULLED OFF THE ROAD, TURNED OFF AND TURNED ON AGAIN. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

23-OCT-2003

Repository ☐

Reference No.  
10043468

**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: \_\_\_\_\_ Date: 1 / 1

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make  
SAAB

Model  
9-3

Model Year  
2003

Date Purchased  
30-JUL-03

Dealer's Name and Telephone Number

Engine:  
No: Cylinders 4

Fuel Type:  
Gas

Original Owner  
☒

Dealer's City

State

Zip Code

Transmission Type  
AUTOMATIC

☒ Anti-lock Brakes  
☒ Cruise Control

Powertrain  
FRONT WHEEL DRIVE

Vehicle Component Code  
103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Multiple Failure: 4

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

Incident Date(s)  
23-OCT-2003

Failure Mileage  
6000

Failure Speed  
0

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

0

0

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

VEHICLE EQUIPPED WITH AUTOMATIC TRANSMISSION STALLS AT LOW SPEEDS DURING BRIEF PERIODS OF ACCELERATION. FREQUENTLY,  
THIS OCCURS WHILE CROSSING AN INTERSECTION, MAKING A LEFT HAND TURN FROM A STOP SIGN, OR A TURN IN FRONT OF TRAFFIC. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

25-OCT-2003

Repository ☐

Reference No.  
10043557

**OWNER INFORMATION (Type or Print)**

Name XXXXXXXXXXXX

Address XXXXXXXXXX

City XXXXXXXX

State MA

Zip Code XXXXXX

Daytime Telephone Number XXXXXXXXXX

E-mail Address XXXXXXXXXX

Evening Telephone Number XXXXXXXXXX

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner XXXXXXXXXX

Date 10/25/03

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side XXXXXXXXXXXXXXXXXXXX

Make  
SAAB

Model  
9-3

Model Year  
2003

Date Purchased  
20-JUL-03

Dealer's Name and Telephone Number  
CENTRAL SAAB

Engine:  
No. Cylinders 4

Fuel Type:  
Gas

Original Owner  
☒

Dealer's City  
NORWOOD

State  
MA

Zip Code XXXXXX

Transmission Type  
AUTOMATIC

☒ Anti-lock Brakes  
☒ Cruise Control

Powertrain  
FRONT WHEEL DRIVE

Vehicle Component Code  
060000 ENGINE AND ENGINE COOLING

Multiple Failure: 1

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

Incident Date(s)  
19-OCT-2003

Failure Mileage  
5000

Failure Speed  
30

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: D0THA19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash

☒ Yes ☐ No

Fire

☐ Yes ☒ No

Number of Persons Injured

0

Number of Deaths

0

Reported to Police

Y

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

THIS IS MY SECOND COMPLAINT. I HAD ORIGINALLY FILED COMPLAINT 10041666 A FEW WEEKS AGO. NOW THE PROBLEM WITH MY SAAB STALLING HAS BECOME WORSE. I WAS TRAVEL IN TRAFFIC, WHEN THE VEHICLE STALLED WHILE IN TRAFFIC. THE ENGINE STALLING CAUSED ME TO REAR END THE VEHICLE IN FRONT ME. WHICH IN TURN CAUSED A FOUR CAR ACCIDENT. THERE WERE NO INJURIES REPORTED, BUT NOW MY PROBLEM IS MUCH MORE SEVERE. I HAVE CONTACTED SAAB ABOUT THIS PROBLEM (MUCH LIKE I DID THE FIRST TIME) AND NOTHING IS BEING DONE TO HELP ME. I AM NOW STUCK WITH A DEFECTIVE VEHICLE THAT STALLS ALL THE TIME, AND IS AS FAR AS I AM CONCERNED TOTALLY USELESS AND A HUGE SAFETY PROBLEM. THE ACCIDENT CAUSED OVER \$15000 IN DAMAGE TO MY SAAB ALONE, ALONG WITH DEPLOYMENT OF THE AIR BAGS. I AM REALLY SURPRISED THAT I WAS NOT KILLED OR SEVERELY HURT IN THE ACCIDENT. THE NHTSA NEEDS TO STEP UP TO THE PLATE AND HELP OUT ALL THE SAAB 9-3 OWNERS HERE... THESE CARS ARE NOT SAFE, AND THEY REPRESENT A VERY LARGE PROBLEM JUST WAITING TO HAPPEN. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

03-DEC-2003

Repository ☐

Reference No.

10049155

**OWNER INFORMATION (Type or Print)**Name XXXXXXXXXXAddress XXXXXXXXXXCity XXXXXXXXXXState XXZip Code XXXXXX

Daytime Telephone Number

XXXXXXXXXX

E-mail Address

XXXXXXXXXX

Evening Telephone Number

XXXXXXXXXX

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner \_\_\_\_\_ Date 1/1**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

SAAB

Model

9-3

Model Year

2003

Date Purchased  
12-JUN-03Dealer's Name and Telephone Number  
VOB SAAB 301-770-2210Engine:  
No: Cylinders 4Fuel Type:  
GasOriginal Owner  
☒Dealer's City  
ROCKVILLEState  
MDZip Code  
20852Transmission Type  
MANUAL☐ Antilock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVEVehicle Component Code  
110000 ELECTRICAL SYSTEM

Multiple Failure: 4

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
17-JUN-2003Failure Mileage  
450Failure Speed  
40**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTN1ABDC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

0

Reported to Police

N


Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

SINCE PURCHASING MY 2003 SAAB 9-3 IN JUNE THE CAR HAS STALLED 4 TIMES WHILE EITHER AT STOP LIGHTS OR SITTING IN TRAFFIC. ONCE THE CAR STALLED WHILE GOING 40 MPH. I'VE TAKEN THE CAR TO THE DEALERSHIP SEVERAL TIMES TO HAVE THE PROBLEM CORRECTED. EACH TIME A SOFTWARE UPGRADE IS PERFORMED. AND EVERY TIME I CONTACT THE SERVICE DEPT THEY ARE SURPRISED AS TO THIS OCCURRENCE. \*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148	
		Date Received 08-JAN-2004	Repository <input type="checkbox"/> Reference No. 10052694
<b>OWNER INFORMATION (Type or Print)</b>			
Name _____		Daytime Telephone Number _____	
Address _____		E-mail Address _____	
City _____	State _____	Evening Telephone Number _____	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Signature of Owner _____ Date ____/____/____			
<b>VEHICLE INFORMATION</b>			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side Y53FD49Y631044641		Make SAAB	Model 9-3
Date Purchased 26-SEP-03	Dealer's Name and Telephone Number _____		Engine: No: Cylinders 4
Original Owner <input type="checkbox"/>	Dealer's City _____	State _____	Fuel Type: Gas
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Anti-lock Brakes <input type="checkbox"/> Cruise Control	Powertrain FRONT WHEEL DRIVE	Vehicle Component Code 103000 POWER TRAIN: AUTOMATIC TRANSMISSION
Multiple Failure: 1			
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>			
Incident Date(s) 09-JAN-2004	Failure Mileage 5500	Failure Speed	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>			
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)
DOT No. (Example: D0TMALSABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:	
Tire Component Code		Tire Failure Type	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>			
Make:	Date Manufactured:	Model No./Name:	
Seat Type:	Installation System:		
Child Seat Component Code:	Failed Part:		
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), failure(s), cost(s), and injury(ies).)			
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths
		0	0
Reported to Police		N	
Narrative Description of Incident(s), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure. i.e., parts repaired or replaced (and if old part is available).			
LEASED 2003 SAAB 9-3 ARC ON 9/26 AND THIS IS MY SECOND COMPLAINT (10051379) AND I STILL HAVE NOT HEARD FROM SAAB CUSTOMER CARE REGARDING THEIR FIXING THE LOUD RIGHT REAR RATTILING/KNOCKING NOISE. I HAVE CALLED NUMEROUS TIMES WITH NO CALL BACK. I NOW HAVE TWO MORE PROBLEMS... THE CAR HESITATES, SPUTTERS AND ALMOST STALLS... THE DEALER INCREASED THE IDLE AND THAT WAS THE FIX... I DO NOT FEEL SAFE WHEN STARTING OFF FROM A STOP OR DRIVING IN STOP AND GO TRAFFIC. ALSO THE TRANSMISSION IS SHIFTING HARD BETWEEN GEARS BETWEEN 10 AND 30 MPH... IT STARTED A FEW DAYS AGO AND IS BECOMING MORE PREVALENT AS EACH DAY PASSES... BOTH THESE PROBLEMS ALONG WITH THE LOUD RATTILING/KNOCKING NOISE FROM RIGHT REAR THAT DEALER SAYS IS NORMAL TELL ME THAT THIS CAR HAS PROBLEMS THAT SAAB DOESN'T WANT TO DEAL WITH AND THAT IS NOT RIGHT. *LA			
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. <b>ATTACH ADDITIONAL SHEETS IF NECESSARY</b>			
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.			



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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100148

Date Received

12-JAN-2004

Repository ☐Reference No.  
10052905**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date

**VEHICLE INFORMATION**17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
Y53FB49S531011826Make  
SAABModel  
9-3Model Year  
2003Date Purchased  
06-DEC-02Dealer's Name and Telephone Number  
WEST COUNTY SAAB 636-227-8303Engine:  
No. CylindersFuel Type:  
GasOriginal Owner  
☒Dealer's City  
MANCHESTERState  
MOZip Code  
63011Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVEVehicle Component Code  
061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure: 50

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
10-JAN-2003Failure Mileage  
500

Failure Speed

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: D0THAL9ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No☐ Yes ☒ No

0

0

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;  
i.e., parts repaired or replaced (and if old part is available).

I HAVE EXPERIENCED INTERMITTENT STALLING WITH MY 2003 SAAB 9-3. AFTER GIVING THE DEALERSHIP APPROXIMATELY 5 CHANCES TO FIX THE PROBLEM, THEY WERE UNABLE TO. I THEN CALLED CUSTOMER SERVICE AND THEY DENIED THAT THERE WAS ANY PROBLEM WITH THE CAR AND TRIED TO SAY THIS WAS THE NORMAL FUNCTION OF THE VEHICLE. THEY HAVE MADE ANOTHER ATTEMPT TO FIX THE CAR. I THEN LEARNED ON YOUR WEBSITE THAT OTHERS HAD EXPERIENCED THIS PROBLEM. I HOPE IT IS RESOLVED. \*LA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100161

Date Received

13-JAN-2004

Repository ☐Reference No.  
10053959**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date: / /

**VEHICLE INFORMATION**17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
YS3FB49S331005779Make  
SAABModel  
9-3Model Year  
2003

Date Purchased

Dealer's Name and Telephone Number

Engine:  
No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

Powertrain

AUTOMATIC

☐ Cruise Control

Vehicle Component Code

061000 ENGINE AND ENGINE COOLING:ENGINE

Multiple Failure: 1

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
29-DEC-2003Failure Mileage  
5200Failure Speed  
30**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

The Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM4LSA9C036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

WHILE DRIVING 30 MPH VEHICLE STALLED. DRIVER WAS ABLE TO AVOID A COLLISION, AND GOT THE VEHICLE TO THE SIDE OF THE ROAD. DEALERSHIP MECHANIC UPGRADED THE SOFTWARE FOR THE ENGINE. \*AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

18-JAN-2004

Repository ☐Reference No.  
10054374**OWNER INFORMATION (Type or Print)**

Name

Address

City

State

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make  
SAABModel  
9-3Model Year  
2003Date Purchased  
22-OCT-03

Dealer's Name and Telephone Number

Engine:  
No. Cylinders 6Fuel Type:  
GasOriginal Owner  
☒

Dealer's City

State

Zip Code

Transmission Type  
AUTOMATIC☒ Antilock Brakes  
☒ Cruise ControlPowertrain  
FRONT WHEEL DRIVEVehicle Component Code  
062000 ENGINE AND ENGINE COOLING: COOLING SYSTEM

Multiple Failure: 3

**FAILED COMPONENT(S)/PART(S) INFORMATION**Incident Date(s)  
15-JAN-2003Failure Mileage  
3850Failure Speed  
55**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment  
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No☐ Yes ☒ No

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Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

I HAVE HAD 2 SAABS IN THE LAST 5 MONTHS DUE TO THE ELECTRICAL SYSTEM FAILING CONSTANTLY AND THE ENGINE STALLING. AFTER 3 MONTHS OF INCONVENIENCE AND ARGUMENTS SAAB GAVE ME ANOTHER CAR. NOW WITH 3800 MILES THE CAR COMPLETELY DROPPED DEAD ON ME AS I WAS DRIVING ON THE EXPRESSWAY AT 55 MPH. IT WAS -40 DEGREES AND IT TOOK ROADSIDE ASSISTANCE 2.5 HOURS TO GET ME. SAAB HEADQUARTERS WAS NOTHING BUT USELESS AFTER DRIVING AROUND IN A TWO TRUCK FOR 8 HOURS SINCE SAAB ROADSIDE AND SAAB HEADQUARTERS COULD NOT TELL ME WHERE TO TAKE MY CAR. I WAS TOWED FROM QUEENS, TO BROOKLYN, TO MANHATTAN AND TREATED WITH NO RESPECT. I ENDED UP GETTING EXTREMELY SICK FROM SITTING IN THE CAR WAITING FOR ROADSIDE FOR 2.5 HOURS. WHEN I CALLED SAAB THEY TOLD ME ITS THE WEATHER THAT CAUSED MY CAR TO DROP DEAD. I WAS NEVER TOLD THAT MY CAR WOULD BE TEMP. TEMPERAMENTAL AND I HAD TO GO TO FLORIDA FOR THE WINTER. THIS IS WHY AMERICAN CAR COMPANIES SUCK. \*CB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to a 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.