

PE03-050

GM 1/8/04

ATTACHMENT 2D

PART 2 OF 4

BOOK 4 OF 4

GM647
PE03-050

GM

1-8-04

ATTACHMENT "2D"

Book 4 of 4

Diane R. Evans
Claims Administrator

358070

ESIS

An Insurance Services Company

300 Renaissance Center
Mail Code 482-C20-D71
Detroit, MI 48268-3000
Phone 313.665.3395
FAX 313.665.0911

March 8, 2000

Midwest Family Insurance
Jeff Goergen, Claim Representative
10601 Wazata Blvd.
Minnetonka, MN 55305

Your File Number: 
Your Insured: 
Our File Number: 
Our Client: General Motors Corporation
Date of Event: 5-6-99

Dear Mr. Goergen:

This letter is in reference to your product liability subrogation claim filed with General Motors Corporation on behalf of your above-mentioned insured.

I have thoroughly reviewed the information that was forwarded to our office, and it is noted that the cause and origin expert was unable to substantiate the specific cause and origin of this loss, and there is no specific technical proof that a manufacturer defect created this occurrence. Without technical evidence to substantiate a defect created this loss, General Motors is unable to reimburse this claim based on general assumptions.

However, should you possess specific technical documentation, which supports your allegations of a manufacture product defect, you may provide the same to my attention for further review and consideration. Please note that you must maintain the vehicle in its immediate post-incident condition.

Thank you for your time in this regard, and if you have any further questions please contact me.

Sincerely,

Diane R. Evans

Cc: file

INCIDENT CASE REPORT

CALL FOR SERVICE

ISN: 01

ILI ACTIVITY:	-NO ENTRY	DISPOSITION:	S	-ASSIT./ADVISED
CPE ACTIVITY:	40008 -VEHICLE	UNIT ASSND:	1E20	-PATROL-A-RUN TO W. CO.
DATE-TM RPTD:	5/06/99 1054	OFF1 ASSND:	7005	-DEP. M. JAKACKI
OPERATOR ID:	[REDACTED]	OFF2 ASSND:		-NO ENTRY
MISC NUMBER:		PATROL AREA:		-NO ENTRY
TIME RECEIVED:	1054	GRID:	T3000	-OAK GROVE
TIME DISPATCH:	1054	JURIS:	18	-MN0020000 - OAK GROVE
TIME ARRIVED:	1109	LOCATION:	CEDAR DR NW	APT:
TIME COMPLETE:	1141	ADDR NUM HIGH:		ST: MN
EVIDENCE:	NO	INTERSECTION:	SWAN LAKE LANE NW	CITY: OAK GROVE
COM PLACE:				ZIP:

OFFENSE

ISN: 01 -- NONE --

REPORTED BY

NAME:	[REDACTED]	DOB:	[REDACTED]	AGE:	[REDACTED]
ADDRESS:	[REDACTED]	CITY:	HAM LAKE	STATE:	MN
SEX:	-NO ENTRY	COUNTY:	02	ZIP:	55420
RACE:	-NO ENTRY	HGT & WGT:			
EYES:	-NO ENTRY	PH:	[REDACTED]		
EMPL/PARENT:		WORK PH:	[REDACTED]		
ISN:	1	PSN:	9	NAME TYPE:	R -PERSON REPORTING
ACTIVITY:	40008				-VEHICLE

JUV REPORTED BY

-- NONE --

VICTIM

-- NONE --

JUV VICTIM

-- NONE --

ARRESTEE

-- NONE --

JUV CONTACT

-- NONE --

VEHICLE

ISN: 01 -- NONE --

STOLEN PROPERTY

ISN: 01 -- NONE --

EVIDENCE PROPERTY

ISN: 01 -- NONE --

INCIDENT NARRATIVE REPORT

OFFICER: LORI

ACTION DATE-TIME: 05/14/99 10:00:00

ON 5/14/99, AT 1054 HOURS, I RECEIVED A CALL FROM 2800 OF A VEHICLE FIRE AT CEDAR DRIVE NW AND SWAN LAKE LANE NW IN THE CITY OF OAK GROVE. I ARRIVED AT 1109 HOURS WITH THE OAK GROVE FIRE DEPARTMENT ALREADY ON THE SCENE EXTINGUISHING THE FIRE. THE VEHICLE THAT CAUGHT ON FIRE WAS IDENTIFIED BY MN LICENSE PLATE NUMBER [REDACTED] WHICH IS ON A 1995 CADILLAC ESCORTADO, 2 DOOR, RED IN COLOR. THE R/O WAS STANDING BY THE SCENE, AND HE WAS LATER ID'D AS [REDACTED], DOB: [REDACTED]

THE VEHICLE WAS ON THE EAST SIDE SHOULDER OF CEDAR DRIVE NW, FACING NORTH, AND JUST TO THE NORTH OF SWAN LAKE LANE NW. I SPOKE WITH [REDACTED] WHO INDICATED TO ME THAT HE WAS TRAVELING NB ON CEDAR DRIVE NW WHEN HE BEGAN NOTICING SMOKE COMING OUT FROM UNDERNEATH THE DASH IN THE INTERIOR OF THE VEHICLE. WHEN HE WENT TO STOP TO PULL OVER TO THE SIDE OF THE ROAD, HE STATED THAT HE HAD NO BRAKES LEFT. AS THE VEHICLE SLOWED DOWN, HE THEN PUT THE CAR IN PARK, WHICH CAUSED IT TO STOP, GOT OUT AND SAW FLAMES UNDERNEATH THE VEHICLE.

HE THEN TOOK HIS CELL PHONE AND CALLED 911 TO REPORT THE CAR FIRE. HE INDICATED TO ME THAT HE WAS THE ONLY OCCUPANT OF THE VEHICLE AND HE WAS NOT INJURED AND DIDN'T KNOW WHAT CAUSED THE FIRE IN THE ENGINE COMPARTMENT OF THE VEHICLE.

AS OAK GROVE FIRE WAS ABLE TO EXTINGUISH THE FIRE, I ASKED [REDACTED] WHICH TOW COMPANY HE WOULD LIKE TO USE. HE STATED THAT HE WOULD LIKE TO HAVE A PRIVATE TOW ORDERED FROM CENTRAL GARAGE AND AT 1115 HOURS, I ORDERED A PRIVATE CENTRAL GARAGE TOW, FLAT BED, TO MY LOCATION. AFTER THE TOW ARRIVED AND LOADED UP THE VEHICLE TO BRING IT BACK TO IT'S TOW LOT, I THEN TRANSPORTED [REDACTED] BACK HOME. I LEFT HIM MY BUSINESS CARD ALONG WITH THE CASE NUMBER TO THE INCIDENT FOR INSURANCE PURPOSES.

NO FURTHER ACTION WAS TAKEN BY MYSELF AT THIS TIME.

DEPUTY M. J. JAKACKI

THIS: BASE ACTION: C KEY: 990000052 CAS: 6/08/1999 09:24 CABS020M
NEXT: BASE ACTION: I KEY: 990000052 ID: H01LS

01 TITLE : CUSTOMER INFORMATION TYPE: GC
02 FIRST : 03 MI: 04 LAST :
05 STREET :
06 CITY : ANTIWER 07 ST: MI 08 ZIP :
09 H PHONE: 10 B PHONE:
11 COMPANY:

VEHICLE/DEALER INFORMATION

12 VIN : 1G6EL12Y1SD612550 ENG: 4.6L MPFI/270 PLANT: HAMTRAMCK MI
13 YR/MO : 1995 EL ELDORADO 14 DEL : 15 MILEAGE:
16 DEALER : 17 ZN/DLR : 00 000
18 CITY : 19 STATE :

CDE #	DESC	CDE	COMMENTS
001	OPEN CAMPAIGN	20	98032
006	FIRE	21	INSURANCE CO. ALLEGES FIRE STARTED FROM FUEL LINE
001	PRODUCT ALLEGAT	22	FIRE TOTALED CAR/OWNER HAS SETTLED W/INSURANCE CO.
		23	
		24	

PF13 BASE PF14 CMTS PF15 APTACL PF16 CLOSE PF17 CSESCN PF18 DLRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL

THIS: CMTS ACTION: I KEY: 990000052

CAS: 5/08/1999 09:24 CAB030M

NEXT: CMTS ACTION: I KEY: 990000052

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 2 TYPE: GC

USER: H01LS DATE: 05/08/99 TIME: 09:18 COMMENT #: 1

RECEIVED LETTER JUNE 1, 1999

LETTER FROM THE MIDWEST FAMILY MUTUAL INSURANCE COMPANY STATING THEY HAVE SETTLED WITH THEIR CLIENT. LETTER ALSO STATED THEY ASSIGNED ENGINEERING AND FIRE INVESTIGATION, INC. TO EXAMINE THE VEHICLE AND IT WAS THEIR DETERMINATION THAT THE FIRE STARTED FROM A FUEL LINE RUNNING BENEATH THE BRAKE MASTER CYLINDER ON THE LEFT SIDE OF THE ENGINE COMPARTMENT.

THE LETTER STATED THEY BELIEVE THIS WAS A MANUFACTURERS DEFECT AND REQUEST REIMBURSEMENT FOR THE DAMAGES PAID OUT FOR THIS CLAIM. THE TOTAL CLAIM IS \$24,738.00 AND INCLUDES INSURED'S \$250.00 DEDUCTABLE. THE VEHICLE IS CURRENTLY LOCATED AT NORTHERN AUTO PARTS IN MINNEAPOLIS, MN. UNTIL JUNE 11, 1999.

MORE====>

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DIRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORSEL PF24 CAL

*I0004 TOP OF DATA DISPLAYED *

THIS: CMTS ACTION: C KEY: 990000052

CAS 06/08/1999 09:28 CABS030M

NEXT: CMTS ACTION: C KEY: 990000052

ID: HOLLIS

GENERAL COMMENTS

TOTAL CMTS: 2 TYPE: GC

USER: HOLLIS DATE: 06/08/99 TIME: 09:28 COMMENT #: 2

I CALLED CHARLES E. DOPPLER, THE CLAIM REPRESENTATIVE WHO SIGNED THE
LETTER TWICE. THE FIRST CALL WAS MADE ON JUNE 2, 99 AND THE SECOND
CALL WAS MADE ON JUNE 7, 99. I LEFT MESSAGES WITH MY NAME AND
PHONE NUMBER INVITING HIM TO CALL AND DISCUSS THE FILE. BUT HE HASN'T
CALLED.

I AM FAXING A COPY OF THE CASE AND THE LETTER TO BSIS TO ADDRESS.

LINDA SHAW

EXT. 44160

***** ADDITIONAL INFORMATION *****

INSURANCE CLAIM [REDACTED] DATE OF LOSS / 5-6-99

AMOUNT OF LOSS \$24,238.00 NET PAYMENT MADE \$23,988.00

CLAIM REPRESENTATIVE - CHARLES E. DOPPLER # 612-417-7036

MORE: N

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DIRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL

*I8005 BOTTOM OF DATA DISPLAYED *

THIS: AFTRCL ACTION: C KEY: 99000002
NEXT: AFTRCL ACTION: I KEY: 99000002
NAME: [REDACTED]

CAS 6/08/1999 09:24 CABS200M
ID: H01LS
YR/MDL: 1995 EL TYPE: GC

AFTER CALL INFORMATION
CUSTOMER REQUEST INFORMATION

REQUEST TYPE	: (CASE/INQ)	PRODUCT CAMPAIGN	: 01		
REQUEST AREA	: PROD	REQUEST SOURCE	: C L CAS		
CONTACT TYPE	: INS-C	IN CORR SEQ #	: N		
WARRANTY	: U (IN/OUT/UNK)	THIRD PARTIES	:		
STOCKHOLDER	: N (Y/N)	GM EMPLOYEE	: N (Y/N)		
DEALER AREA	:				
PART DELAY START:		PART DELAY END	:		
TRANSFER TO ID	:	ASM ASSIGNED	:		
CASE OPEN DATE	: 06 08 99	SCRAP DATE	: 08 08 1999		
ROUTING CODE	: CAC CAS LOC: LEGL	TRANSMIT	: N (Y/N)		
CORRES TYPE	:	TRANSMIT DATE	: 00		
FOLLOW UP DATE	:	CORP CASE #	:		
FILE RETENTION	: 33	POSSIBLE SAFETY	: Y (Y/N)		
LAST ALTERED ID	: H01LS	LAST ALTERED DATE	: 06 08 99		
REJECT CLOSE	: N (Y/N)	REOPEN CASE	: N (Y/N)		
PF13 BASE	PF14 CMTS	PF15 AFTRCL	PF16 CLOSE	PF17 CSBSCN	PF18 DLRLC
PF19 CRIS	PF20 TELLST	PF21 LITLST	PF22 OPENLST	PF23 CORREL	PF24 CAL

THIS: CLOSE ACTION: I KEY: 99008052
NEXT: CLOSE ACTION: I KEY: 99008052
NAME: [REDACTED]

CAS: 08/1999 09:25 CABS040M
ID: H01LS
YR/MDL: 1995 EL TYPE: GC

CASE CLOSING INFORMATION

FILE RETENTION : 33 POSSIBLE SAFETY : Y (Y/N)
CONTACT DATE : 06 08 99 DLR CONCLUSION DATE: 06 08 99
CLOSING DATE : 06 08 99 RESPONSIBLE DEALER :
CUST SATISFIED : Y (Y/N) CLOSE CASE : Y (Y/N)
CO REVIEW CLOSE : CO REVIEWED : (Y/N) DATE:
RCN REVIEW CLOSE : RCN REVIEWED : (Y/N) DATE:

CDE # DESC CDE COMMENTS
A01 0 OPEN CAMPAIGN 98032
NOTED

A96 0 FIRE INSURANCE CO. ALLEGES FIRE STARTED FROM FUEL LINE
SENDING CASE AND LETTER TO ESIS

T01 0 PRODUCT ALLEGAT FIRE TOTALED CAR/OWNER HAS SETTLED W/INSURANCE CO.
SENDING CASE AND LETTER TO ESIS

MORE: N

PF13 BASE PF14 CMTS PF15 ATTRCL PF16 CLOSE PF17 CBESCN PF18 DLRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORSEL PF24 CAL

*80438 CASE IS CLOSED *



**MIDWEST FAMILY MUTUAL
INSURANCE COMPANY**

Telephone • 612-645-6000

10801 Wayzata Blvd., Minnetonka, MN 55305

Mailing Address:

P.O. Box 9425 • Minneapolis, MN 55440-9425

March 27, 1999

Cadillac Customer Service Center
PO Box 436004
Pontiac, MI 48343-6004

RE: Our Claim Number: 0222956
Our Insured: [REDACTED]
Date of Loss: 5/06/99
Amount of Loss: \$24,238.00
Net Payment Made: \$23,988.00

Dear Sir or Madam:

This claim involves our insured's 1995 Cadillac Eldorado VIN # 1G6EL12Y18U612650 starting on fire while our insured was driving it. The vehicle was a total loss.

We assigned Engineering and Fire Investigations, Inc. to examine the vehicle and it was their determination that the fire started from a fuel line running beneath the brake master cylinder on the left side of the engine compartment.

It is our contention that this is a manufacturers defect and we request that your company reimburse Midwest Family Mutual Insurance Company for the damages paid out for this claim. Our total claim against you is \$24,238.00 and includes our insured's \$250.00 deductible.

The vehicle is currently located at Northern Auto Parts in Minneapolis, MN. Their phone number is (612) 339-9795. The vehicle will be available until June 11, 1999.

If you should have any questions, I may be reached at the number below.

Respectfully,

Charles E. Doppler
Claim Representative
(612) 417-7036

RECEIVED

JUN 01 1999

DEPT. 805
CUSTOMER ASSISTANCE CENTER

Case #99000805L



Engineering and Fire
Investigations

4826 Washington Avenue South
Eden Prairie, MN
55344
T: 612-942-9812
T: 800-326-5913
F: 612-942-7002

May 24, 1999

**Mr. Chuck Doppler
Midwest Family Mutual Insurance Company
PO Box 9425
Minneapolis, MN 55440-9425**

**Re: Insured: [REDACTED]
Date of Loss: May 6, 1999
Loss Location: Bethel, MN
Claim No.: [REDACTED]
EFI File #: [REDACTED]**

Dear Mr. Doppler:

The Vehicle Fire Examination Report accompanies this letter. Also enclosed are one diagram, one area map, a VIN check profile of the VIN obtained through law enforcement efforts, and the TSB entries for this particular make of vehicle. It should be noted none of the TSBs or recall involves the fuel lines for the 1999 Cadillac El Dorado.

The fire scene examination was conducted on May 14, 1999, approximately eight days after the fire of May 6, 1999. The examination took place at the North Metro Auto Salvage in Bethel, Minnesota. The vehicle was stored outside in a parking lot and unsecured.

Examination revealed heavy fire damage in the engine compartment passing through the firewall into the interior into the vehicle. The fire originated on the left side of the engine compartment near a fuel line just forward of and below the brake master cylinder. I strongly suspect a leaking fuel line at this location in the neoprene portion of the fuel line. However, the neoprene fuel line was consumed by fire. There are no remains of this fuel line to examine or determine if there was wear damage or defect.

As the fire progressed at this location, it attacked the lines for the brakes, the master cylinder, and fluid reservoir for the brakes. The fire attacked the fuse panel located in the left side engine compartment, as well as the remaining portion of the engine compartment.

I spoke to the insured, [REDACTED] by telephone. He said he had owned the vehicle for about one year and it had approximately 23,000 miles on it. He had not had it serviced at any time during his ownership. On occasion, he would detect an odor commonly associated with gasoline while driving the vehicle and it would also appear to him to be starved for fuel. This would be consistent with a leak in the fuel line.

[REDACTED] said that while traveling to the bank, he noticed a strange odor in the car. As he attempted to slow down, he discovered he did not have brakes. He was able to pull over to the shoulder of the road and use his transmission to stop the vehicle. Some ladies passing by informed him there was fire underneath the vehicle. He exited and observed the fire in the engine compartment and attempted to open the hood but was not able to do so due to the amount of heat and smoke. He telephoned the fire department via 911 through his cellular telephone and waited the reported eighteen minutes for the fire department's arrival.

This motor vehicle fire is accidental. The fire originated in the engine compartment on the left side of the engine at or near a fuel line connection forward and below the master cylinder of the brake. The fire progressed from the engine compartment into the passenger compartment, destroying the vehicle.

In keeping with instructions received previously, no samples or evidence were collected from the vehicle.

Enclosed are all photographs and photographic negatives. None are being retained by EFI.

This file will now be closed. It may be reopened at any time upon request.

Best regards,


Keith A. Tarbox
Investigator
715/726-9900

KAT/arf

Enclosures

cc: file

Reviewed by: *J. Smith*

PHOTO IDENTIFICATION SHEET

1. Exterior view, driver's side.
2. View into interior from driver's side.
3. Interior view, driver's side.
4. Interior view, floor level, driver's side.
5. Exterior view.
6. Exterior view.
7. Exterior view.
8. Interior view, passenger side.
9. Interior view, passenger side, floor level.
10. Exterior view, front.
11. Interior view from exterior front windshield.
12. Engine compartment.
13. Passenger side, engine compartment.
14. Driver's side, engine compartment, area of origin.
15. Driver's side firewall, master brake cylinder location.
16. Driver's side front wheel well, location of fuse box.
17. Driver's side engine area.
18. Driver's side engine area. Note missing neoprene fuel line consumed by fire.
19. Driver's side of engine, area of origin.
20. Exemplar engine from Cadillac, area of origin location.

Photo Sheet



No. 1



No. 2

Photo Slides



No.



No.

CFI

Photo Sheet



No. 5



No.

EP-1

Photo Sheet



EF-1

Photo Sheet

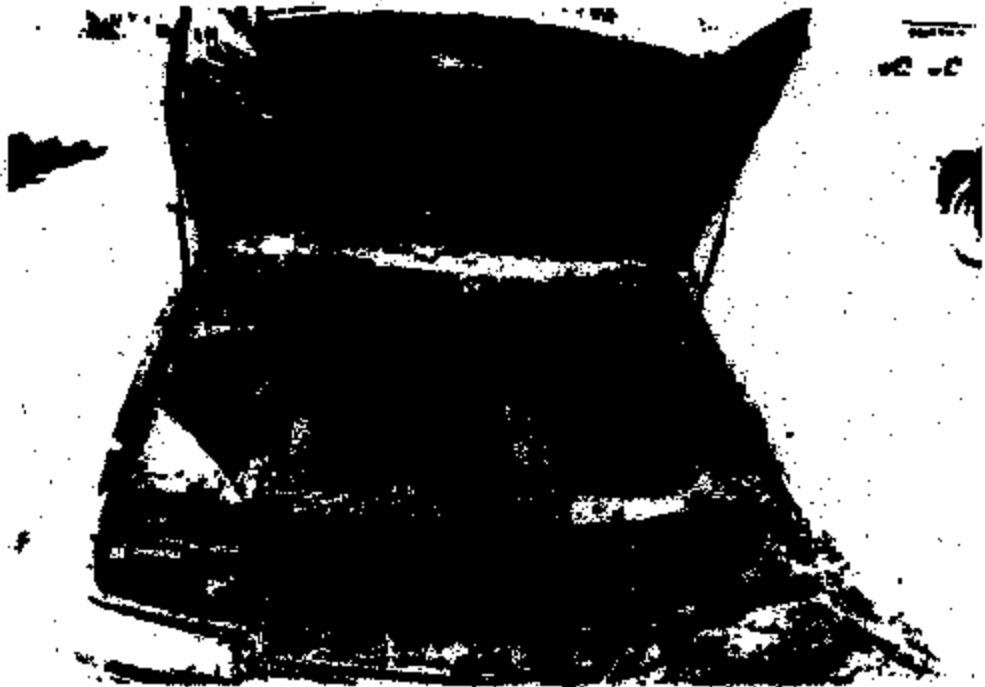


No. 2

No. 1

EFI

Photo Sheet



EFI

Photo Sheet



No. 13



No. 1

EFI

Photo Sheet



No. 1



No. 2

EFFE

Photo Sheet



No. 1



Page 1 of 1

EFL

Photo Sheet



No. 19



No.

EFI

Photo Sheet

EF: 100-100000
EVIDENCE PHOTOGRAPHY



No. 21



No. 22

EF1

Photo Sheet



No. 23



No

July 12, 1971

CLAIM NO: [REDACTED]

INSURED: _____

DATE TAKEN: 5/12/99

TAKEN BY: [Signature]

PICTURE NO: 1-6

DESCRIPTION: Dr. case

PICTURE NO: _____

DESCRIPTION: _____













VEHICLE FIRE EXAMINATION REPORT

Make: [REDACTED] **VIN No.:** [REDACTED]
Manufacturer: CADILLAC **Year:** 1995 **Model:** EL DORADO **Body Style:** 2DR
Make Inspection Date: [REDACTED] **Date:** [REDACTED] **Odometer:** UNDETERMINED
Engine on Vehicle: [REDACTED] **Year:** '99 **State:** MD **VIN:** 1G6EL12415U612658
Vehicle Registration Date: 5-14-99 **Location:** NORTH METRO SALVAGE, BETHEL, MD

Fire Damaged Areas

	<input type="checkbox"/> Exterior	<input checked="" type="checkbox"/> Interior	<input checked="" type="checkbox"/> Engine Compartment
Bumper and Grill	Burned <input checked="" type="checkbox"/>	Distorted/Melted <input checked="" type="checkbox"/>	Accelerant Patterns <input type="checkbox"/>
Hood	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left Front	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right Front	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left Door(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right Door(s)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trunk	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left Rear	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right Rear	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rear Bumper Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Underside	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Burned	CONDITION PRIOR TO FIRE		
		Serviceable	Unserviceable	Unseen Tread Wear
Left Front	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right Front	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Left Rear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Right Rear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Tires indicate signs of recent removal/exchange? Yes No
 Wheels/wheel stems indicate recent removal/exchange? Yes No
 Indicate areas of forced entry: Door(s) Hood Trunk Glass

GLASS

	Shattered	Cracked	Distorted/Melted	Broken
Windshield	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Left Door(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Right Door(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rear	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunroof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remarks: LAURENCE WALTER TOWERS INTERIOR/ENGINE

Interior: [REDACTED] **Exterior:** [REDACTED]
 Doors open during fire: Yes No
 Windows open during fire: Yes No
 Was key in ignition: Yes No
 Has any accessories disconnected: Yes No
 Any unusual fire pattern: Yes No
 Any unusual odors: Yes No
 Any unusual damage to: Yes No
 Any unusual damage to: Yes No

Remarks: VEHICLE SEEN 3 DAYS AFTER FIRE
 - FIRE DETERMINED TO BE INTERIOR
 FROM ENGINE COMPARTMENT

SUPERIOR
 N
 R
 C

EQUIPMENT

	Yes	No	Yes	No
Hood open during fire	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Radiator melted	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Upper radiator hose burned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lower radiator hose burned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Drive belts burned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Other hoses burned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Fan and shroud burned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Inner fenders burned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Heating system burned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Remarks	<u>UPPER MOTOR MOUNT BRACKETS BURNED</u>			

ELECTRICAL

	Missing	Burned	Shorted/ Melted	Shorted/ Acid
Battery	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Battery connections	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Battery cables	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Stator *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternator/generator *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ignition system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fuse panel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wiring harness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Remarks	<u>HEAT DAMAGE</u>			

FUEL SYSTEM

	Missing	Burned	Shorted/ Melted
Filter cap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filter assembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel tank assembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel lines	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fuel pump(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fuel filter(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carburetor/injector/throttle	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Air intake filter	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fuel vapor recovery system	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Exhaust and tail pipes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muffler and catalytic converter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any loose fuel line connections? *	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Any evidence of tampering?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Fuel tank	<input checked="" type="checkbox"/> Empty	<input type="checkbox"/> 1/4	<input type="checkbox"/> 1/2 <input type="checkbox"/> 3/4 <input type="checkbox"/> Full
Remarks	<u>FIRE STARTS NEAR CLAMPED HOSE LINE; THE FIRE TIGHTNESS UNDETERMINED</u>		

EVIDENCE

Evidence of any explosion or rupture?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Was an oil sample obtained?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Laboratory	_____	
Was a fuel sample obtained?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Laboratory	_____	
Were debris samples obtained?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Laboratory	_____	
Remarks	<u>ADDITIONAL COSTS FOR SAMPLES UNWARRANTED</u>	
Investigator	<u>J. [Signature]</u>	
Date	<u>5-14-99</u>	

INDEX

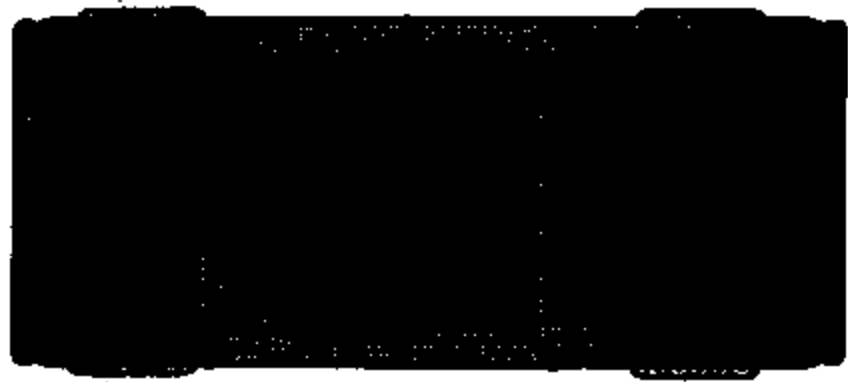
Diagram Sheet

Name (Agency/Case)

Location **BETHEL, MN.**

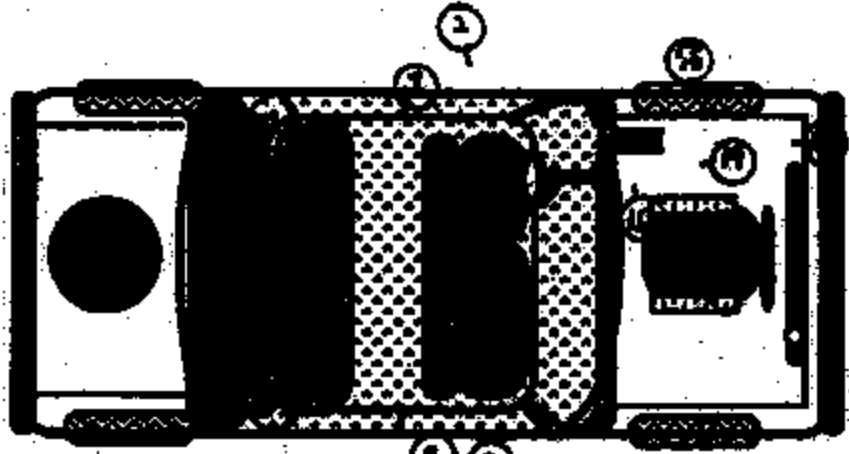
IME File Number

①



TOP VIEW

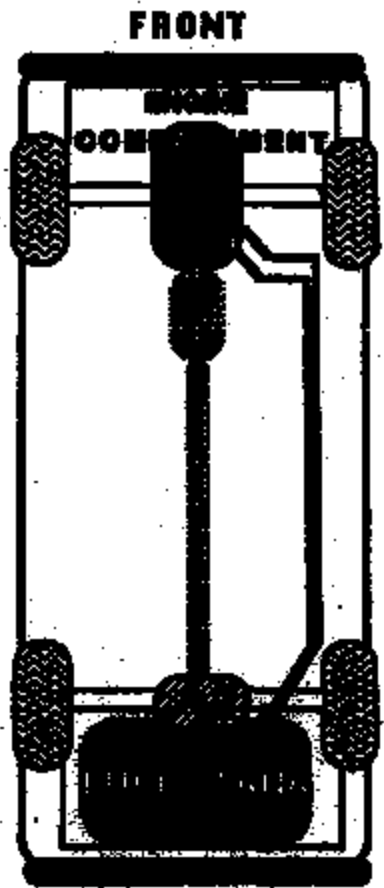
⑦



INTERIOR VIEW

FRONT

⑩



FRONT UNDERSIDE VIEW

FRONT

Prepared By **K. Tabak** Date **5-14-99** Scale **None**

This diagram is for illustrative purposes only and may not accurately represent the structure's, dimensions, attachment, position or other facts.

Page 1 of 1

PHOTO IDENTIFICATION SHEET

1. Exterior view, driver's side.
2. View into interior from driver's side.
3. Interior view, driver's side.
4. Interior view, floor level, driver's side.
5. Exterior view.
6. Exterior view.
7. Exterior view.
8. Interior view, passenger side.
9. Interior view, passenger side, floor level.
10. Exterior view, front.
11. Interior view from exterior front windshield.
12. Engine compartment.
13. Passenger side, engine compartment.
14. Driver's side, engine compartment, area of origin.
15. Driver's side firewall, master brake cylinder location.
16. Driver's side front wheel well, location of fuse box.
17. Driver's side engine area.
18. Driver's side engine area. Note missing neoprene fuel line consumed by fire.
19. Driver's side of engine, area of origin.
20. Exemplar engine from Cadillac, area of origin location.

21. Master cylinder area on exemplar vehicle.
22. Area of origin on driver's side of engine on exemplar vehicle.
23. Fuel line location on exemplar vehicle for neoprene fuel line.
24. Another view of photo twenty-three.

SLM	SECRET	SLM	SECRET
SLM	SECRET	SLM	SECRET

DATE			
DESCRIPTION			\$2,000.00 VEH FUEL TO CABLE LC
TO			
BY			
DATE	MINNESOTA DEPT. OF PUBLIC SAFETY		REUR FUEL AND TRAVEL FEE
TO			
BY			
DATE	MINNESOTA DEPT. OF INVESTIGATION		\$7.50 TRUCK EXPENSE
TO			
BY			
DATE			
TO			
BY			

X

SALVAGE RECORDS

EQUIPMENT SHEET

1962L1241SU612650

KD 66711
7/16/97

STOCK # 55204 DATE IN: 7/15/97

SALESPERSON: G.M.A.C. - NO. STAR - RAY AGESON

001 AUTOMATIC

002 5 SPEED

003 AIR CONDITIONING

004 DRIVERS AIRBAG

005 PASSENGER AIRBAG

006 SUNROOF

007 KEYLESS ENTRY

008 THEFT DETERENT SYSTEM

009 DIGITAL DASH

010 CRUISE CONTROL

011 LEATHER INTERIOR

012 CLOTH INTERIOR

013 CUSTOM WHEELS *Chromed*

014 HEATED SEATS

015 LUMBAR SUPPORT

016 BOSE STEREO

017 CD PLAYER

018 ANTI-LOCK BRAKES

019 POWER WINDOWS

020 POWER LOCKS

021 POWER SEATS *C.R.*

022 MEMORY SEATS

023 SIM-CON TOP

024 GOLD PACKAGE

025 SPRING EDITION

026 4 X 4

027 SHIFT ON COLUMN

028 SHIFT ON FLOOR

029 FRONT WHEEL DRIVE

030 REAR WHEEL DRIVE

031 TWILIGHT SENTINEL

032 DELAY WIPERS

033 HEATED WINDSHIELD

034 1/4 VINYL ROOF

035 1/2 VINYL ROOF

036 CONVERTIBLE

037 TELEPHONE

038 TOWING PACKAGE

039 OTHER

040 OTHER

12,926 miles

VIS

5/30/95

COMPASS

INTERIOR COLORS

RED (050)

BLACK (051)

DK. BLUE (052)

MOCHA (053)

NEUTRAL (054)

WHITE (055)

TAN (056)

TAUPE (057)

LT BLUE (058)

GRAY (059)

BROWN (060)

BEECHWOOD (061)

DK CHERRY (062)

NE
4 CYL
6 CYL

EXTERIOR COLOR

PEARL RED



MATT J. DANNEC

Account Manager

**ANDERSON
CADILLAC**

100 HAZARD BLVD
MINNEAPOLIS, MN
55426-3873

544-3501

*CHANGE ENST-ASSISTANCE CENTER
200-456 2000
1-800-436-0044
PORTLAND, ME 48302*

LARGE LOSS NOTICE

To: Mr. H. _____ Steve E. _____

First report to underwriting for review - all loss transactions in excess of \$5,000.

EXAMINER CHUCK DUPPLER

DATE 5/19/99 POL TYPE AUTO

POLICY NO. _____
 EXP. DATE 2/2/99
 CLAIM NO. _____
 DATE OF LOSS 5/6/99
 DATE REPORTED 5/10/99
 CLAIMANT #1 _____
 CLAIMANT #2 _____

INSURED _____
 CITY/ST _____
 LOCATION OF LOSS OAK GROVE MN
 AGENT ST. FRANCIS INSURANCE
 LIMITS: LIAB. _____ DWELL _____
 OTHER? _____ \$ _____

FACTS: INSURED WAS DRIVING DOWN ROAD - VEHICLE CAUGHT FIRE; CALLED FIRE DEPARTMENT BUT THEY DIDNT ARRIVE FOR 20 MINUTES; FIRE INVESTIGATOR STATED THAT THE FIRE STARTED IN THE ENGINE COMPARTMENT BELOW THE CRANK MASTER CYLINDER WHERE A FUEL LINE MEETS A CONNECTOR.

INJURIES: NONE

RESERVES

COVERAGE	INITIAL RESERVE	RESERVE CHANGE TO	DATE	CLAIMANT
<u>COMP</u>	<u>\$1000</u>	<u>\$23,988.10</u>	<u>5/11/99</u>	<u>Insured</u>
<u>COMP</u>	<u>\$1000</u>		<u>5/19/99</u>	<u>Insured - PAID</u>

UNDERWRITING RECAP:

UNDERWRITING ACTION:

cc: Ron Boyd Und..... Mktg Rep..... Policy File LL file

CLAIM # 0777954

NAME G. SANDAL

PAYMENTS

AMOUNT	COVERAGE	PAYEE	PAYMENT TYPE
988	COMP	(S)	<input checked="" type="checkbox"/> Regular <input type="checkbox"/> Expense type:
Mail with attached _____ Do not Mail, Return to _____		MAIL TO DO NOT MAIL - INS STOPPING IN TO PICK UP CHECK	FINAL/PARTIAL <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Final TAX ID# _____
CLM#	(S)	RE:	VEH. FIRE '95 CAD1.

AMOUNT	COVERAGE	PAYEE	PAYMENT TYPE
			<input type="checkbox"/> Regular <input type="checkbox"/> Expense type:
Mail with attached _____ Do not Mail, Return to _____		MAIL TO	FINAL/PARTIAL <input type="checkbox"/> Partial <input type="checkbox"/> Final TAX ID# _____
CLM#		RE:	

OTHER INSTRUCTIONS

- G-7 P.R. Authorization Application for Benefits
- G-8 Physician Report Wage Verification
- Other: _____

NOTE:

RECOVERY

	AMOUNT	COVERAGE	CLAIM	TYPE	EXP
<input type="checkbox"/> Check				<input type="checkbox"/> Salvage	
<input type="checkbox"/> Reserve				<input type="checkbox"/> Subro.	
				<input type="checkbox"/> Deduct.	

MODIFICATIONS

AMOUNT	COVERAGE	CLAIM	ACTION	EXP
			<input type="checkbox"/> Add	
			<input type="checkbox"/> Modify	
			<input type="checkbox"/> Close	
			<input type="checkbox"/> Add	
			<input type="checkbox"/> Modify	
			<input type="checkbox"/> Close	

SPECIAL INSTRUCTIONS:

[Handwritten signature]

CSD
 AUTHORIZED BY
5-19-99
 DATE

CLOSE FILE

JANET GORDAL
 COMPLETED BY
 MAY 19 1999
 DATE

UPDATED #0222956

\$20075	BASE VALUE 95 CADILLAC ELDERADE
+ 250	CD PLAYER
+ 200	BUSE SYSTEM
+ 250	ALUMINUM WHEELS
+ 100	THEFT RECOVERY SYSTEM
+ 1675	LOW MILES

22700

- 250 DEDUCTIBLE

22450

+ 14250

TAX

+ 62.50

REN LICENSE

~~23081.50~~

~~17182~~

24081.50

\$100.00
CUSTOM PAINT

LEIN:
NONE

SALVAGE DEALER:
NORTHEM AUTO PARTS
(612) 339-9795

BID = \$500
643 N. 6TH ST
MINNEAPOLIS, MN 55401

0222956

\$20075

+ 250⁰⁰

+ 175⁰⁰

- 250⁰⁰

21750⁰⁰

+ 1321.13

+ 62.90

23242.50

BASE VALUE '95 CADILLAC ELDRADO

ALLOY WHEELS

UNKNOWN MILEAGE

DEDUCTIBLE

TAX

RENEWAL LICENSE \$775⁰⁰ ZWOREN

Handwritten: KEPT IN PROPER SHEET
~~REPAIRS~~ ~~AND~~ ~~REPAIRS~~
w/ proper options

\$100⁰⁰

\$500⁰⁰

Pay to order of

AMOUNT AUTO WRECKERS (612) 755-4550

NUMBER INTO PARTS (612) 755-4795

FROM RECEIVED INTO PARTS

DATE OF RECEIPT 11/17/95

July 20, 1999

CD: This is Chuck Doppler speaking. I'm calling from Minneapolis, Minnesota. Telephone number is 612-417-7036. I'm speaking to [REDACTED] at telephone number [REDACTED], and we're discussing an incident which occurred on May 6, 1999, in ... let's see, it happened in Oak Grove? Is that right?

DG: Yeah.

CD: O.k. And today's date is May 13, 1999. The time is approximately 9:30. [REDACTED] do you realize I'm recording this interview?

DG: Yeah.

CD: And do I have your permission to record the interview?

DG: Yes.

CD: And are you aware that this could be used in the court of law?

DG: Uh-huh.

CD: O.k. Could you state your full name and spell your last name, please?

DG: [REDACTED]

CD: And your address?

DG: [REDACTED], Ham Lake.

CD: O.k. What's the zip code out there?

DG: [REDACTED]

CD: Your social security number?

DG: [REDACTED]

CD: Alright. Is there another telephone number you can be reached at besides this one?

DG: [REDACTED]

CD: And that's a work number?

DG: No, that's my home. But the first one I gave you is my work number. That's the easiest to get a hold of me. I have a machine there and stuff, so ...

Recorded Statement of Derris Graydon

Insured [REDACTED]

DGL: 5-5-88

CD: Oh, o.k. Alright. Your date of birth?
DG: [REDACTED]
CD: Marital status?
DG: Divorced.
CD: O.k. Your occupation?
DG: I'm a gambling distributor.
CD: Alright. And who's your employer and how long have you been employed with 'em?
DG: I own a business.
CD: Oh, you're a business owner? O.k.
DG: Uh-huh.
CD: Do you have your driver's license number handy?
DG: Yes. It's [REDACTED]
CD: O.k. And the number of years of driving experience you have?
DG: Pardon?
CD: The number of years of driving experience you have?
DG: Oh ...
CD: Just a rough ...
DG: ... about 40.
CD: O.k. Are there any restrictions on your license?
DG: No.
CD: Alright. And could I get the name and address of a relative who would always know how to contact you?
DG: I guess [REDACTED]
CD: O.k. And their address?
DG: That [REDACTED] in Coon Rapids.
CD: Alright. And their relation?

Recorded Statement of Dennis Gravdal

Insured: [REDACTED]

DOL: 5-6-99

- DG: That's a brother-in-law.
- CD: O.k. Alright. At the time of the accident, where were you going? Where were you coming from, and what were you ... where were you going to?
- DG: I was going to People's Bank in East Bethel.
- CD: O.k. And coming from home?
- DG: Yeah.
- CD: O.k. And you were drivin' a 1995 Cadillac Eldorado?
- DG: Uh-huh.
- CD: O.k. And what color is that vehicle?
- DG: Red.
- CD: O.k. What's the normal purpose of use of the vehicle?
- DG: Just personal use.
- CD: O.k. Are you the owner of the vehicle?
- DG: Yes, I am.
- CD: O.k. Were the ... were you the only occupant of the vehicle?
- DG: Yes.
- CD: O.k. What was the mechanical condition of the vehicle prior to the fire?
- DG: Perfect.
- CD: O.k. What was the date and time of the incident?
- DG: Well, I believe it was the ... well, the 6th. What is it? May 6th. I know it was right around noon.
- CD: O.k. What was the exact location of the incident?
- DG: County Road 68, I believe it was, and about 190th. I'm not real sure, but it's right in that area there.
- CD: O.k. Is this a residential or a commercial area?
- DG: Well, that's kind of residential.
- CD: And do you know the posted speed limit in the area?

Recorded Statement of Dennis Gaudel

Insured: [REDACTED]

DOL: 5-8-88

DG: I believe it's 50.

CD: O.k. And you were on com ... you were driving down County Road 58 (sic) then?

DG: Uh-huh.

CD: O.k. Let's see. What first brought your attention to the fire?

DG: Well, I was drivin' along and there was just some smoke that likes was comin' up from under the dash. And I stepped on the brakes, and there was absolutely no brakes and went ... the pedal went right to the floor. And then I just got ... pulled over, and then I ... and I pulled ... you know, put it in Park and it, you know, kinda clunked and the car stopped. I got out. And a couple women going the other way stopped and said there's flames there. And then I looked underneath and ... I don't know, you could see somethin'. And I had a cell phone and I called 911.

CD: O.k. And which fire department and police came to the scene then?

DG: Anoka County Sheriff's Department and Oak Grove Fire Department.

CD: O.k. How long did it take the fire department to get there?

DG: I'd say 20 minutes to a half hour.

CD: O.k. And how long 'til the Sheriff arrived?

DG: Well, he came after the fire department was there.

CD: O.k. And could you tell where the flames were initially coming out of?

DG: Well, it was under the hood some place. I don't know what ... you know, like I said, it was just barely a little bit of smoke at all when I called 911, but there was some flames comin' out from underneath where the motor was, you know.

CD: O.k. Did you ... you didn't open up the hood at all then once you stopped the vehicle?

DG: No. I couldn't. I mean I got a couple whiffs by then, you know, when I got stopped, and I got out and I dialed 911, then I, you know, tried to open the hood, and it just was so bad that you couldn't even breath.

CD: O.k. And so, let's see, were ... had you had any recent repairs done to the vehicle prior to ...

DG: Nope.

CD: ... this?

DG: Nope.

CD: O.k. Do you remember when the last repair was done to it, if any?

DG: Done nothin' ... nothin' done to it since I owned it.

CD: O.k. And how long have you been the owner?

DG: Oh, about a year.

CD: O.k. Is there any lienholder or mortgagee on the vehicle?

DG: No. I paid cash for it.

CD: O.k. Were you injured at all in the ac ... in the accident?

DG: No.

CD: O.k. Was anybody else in the vicinity injured?

DG: No. No.

CD: O.k.

DG: 'Cuz they stayed back quite a ways.

CD: Alright. Did you get any ... the names of the people that told you that ... the two ladies that said there was fire underneath your car?

DG: Yeah.

CD: What were their names?

DG: I just know the one lady's last name was Lockwood. And I have it at home, the ... her name and phone number and stuff.

- CD: O.k. Yeah, well, I'd like to get that from you, too, if I could. Did you ... have you gotten a copy of the police report regarding this?
- DG: No.
- CD: O.k. I'll get you ... I'll send you an information release in the mail and so you can just sign it, fill that out, and return it to me, then we can get a copy of the report and see ... so you don't have ... were having ... there's no repairs done to it yet, and we don't have any idea how the fire started?
- DG: No. Like I said, I was just drivin' along when all the smoke, you know ... you know, was comin' out from under the hood. And then I ... when I went to stop, I just put the brakes on. The pedal went right to the floor. There was nothin' there and ...
- CD: O.k. How'd you get it to stop then? You just kinda ...
- DG: I just ...
- CD: ... coasted?
- DG: ... well, I just put it in Park and ... you know, was slowin' down and I put it in Park. And you could hear, you know, when you put it in Park, the click-click-click or whatever. But it, you know, stopped, so ...
- CD: Uh-huh. O.k. Alright. Then were there any facts you'd like to add to your statement at this time?
- DG: Huh-ah. No.
- CD: And have you understood all my questions?
- DG: Uh-huh.
- CD: And have all your answers been true and correct to the best of your knowledge?
- DG: Yes, they have.
- CD: O.k. Thank you for the interview. And, with your permission, I'll turn off the recorder.

Recorded Statement of [REDACTED]

Insured: [REDACTED]

DGL: 5-8-89

DG: O.k.

***** END OF RECORDED STATEMENT *****

Midwest Family Mutual

Claim No.: [REDACTED]

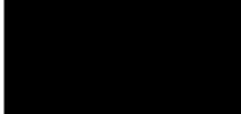


ESIS

An Insurance Services Company

June 16, 1999

P.O. Box 02489
Detroit, MI 48202
Telephone 313.556.9371
Facsimile 313.974.7980

Charles Doppler
Midwest Family Mutual
10601 wayzata Blvd
Minnetonka MN 55305

Your File Number: 
Claimant: 
Our File Number: 
Our Client: General Motors Corporation
Date of Event: 5/6/99

Dear Mr. Doppler:

This letter will serve to acknowledge receipt of your correspondence dated March 27, 1999 regarding the above matter. You have advised that your insured's 1995 Cadillac Eldorado experienced a fire causing damage to the vehicle on May 6, 1999. You have also invited General Motors to participate in an inspection of this vehicle.

We are not interested in attending an inspection of the vehicle at this time. We would, however, request that any inspection completed be fully documented by video and photographs. Further, all evidence should be preserved for potential inspection by a General Motors representative at a later date.

If you have any questions, please call me at 1.800.888.0164.

Sincerely,

Greg Thrasher
Team Leader

July 12, 1999

Charles E. Doppler
Midwest Family Mutual Ins. Co.
P O Box 9425
Minneapolis MN 55440-9425

485 W. MILWAUKEE
DETROIT, MI 48232
Telephone 313.556-9371
Facsimile 313.974.7580

Your File Number: [REDACTED]
Claimant: [REDACTED]
Our File Number: [REDACTED]
Our Client: General Motors Corporation
Date of Event: 5/6/99

Dear Mr. Doppler:

This will acknowledge your claim on the above-referenced matter. In order to evaluate your claim, the following documents and information are respectfully requested:

1. A copy of your expert report which states your theory of liability. Also include the original or laser color copies of the photographs taken by your expert.
2. A copy of the police and/or fire report.
3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.
4. Advise if the vehicle owner and/or operator note anything wrong or unusual about the vehicle prior to the incident.
5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If repairs and maintenance were performed by the vehicle owner, then a chronological summary of operations performed is needed.
6. Advise as to any after-market equipment which may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.
8. Did the vehicle owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.
9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.
10. Provide copies of your proof of payment.
11. The present location of the subject vehicle and its availability for inspection.

Upon receipt of the above-requested information and documentation, this matter will be assigned a claim number and further review of this matter will be complete. During this entire process, the subject vehicle should remain available for inspection, if necessary.

If you have any questions, please feel free to contact me at 1.800.888.0164.

Sincerely,

Greg Thrasher
Property Damage Unit

/tmc

Assist(R) Version 1.17

(c) by NICB 1991

Law Enforcement Edition

VIN:1G8EL12Y1SU612650

DIGIT	DESCRIPTION	MEANING
1	Country of Origin	UNITED STATES
G	Manufacturer	CADI GENERAL MOTORS
8	Make	CADILLAC
EL	Line	ELDORADO
1	Body Style	2 DR COUPE
2	Restraint System	MANUAL W/DRIVER & PASS. AIR BAGS
Y	Engine	4.6L V8 MFI
1	Check Digit	CHECK DIGIT VALID
S	Year	1995
U	Assembly Plant	HAMTRAMCK, MI
612650	Sequence Number	IN RANGE

***** VIN Passed Test *****

VIN indicates a 1995 GENERAL MOTORS ELDORADO

(c) by NICB, 1991

ON WARRANTY HISTORY INQUIRY
(UPDATED THRU 19990617)

VEHICLE-ID-NUMBER DESCRIPTION COOR DEL-CLR DEL-DATE DEL-COOR PD1-ELIN CLN
1868L12Y18U6T26F0 ELBORADO N 1220424 19950330 100 PAID 14

PREC-DTE: 19950123 DELMR-DATE: WARRLK-DTE: 19990601
INV-DTE: 19950123 DELMR-COOR: WARRLK-TYP: 39
INV-CLR: 1220424 ENTP-TO-CLR: 1220424

C	T	NOBLK	NO.	BCDATE	NO-NO.	DOC-NO	LN	LNOP	LN-TOTAL	ODOMETER	AUTH	AUTH
											ID	CODE
001	*		985	19902501	STRLV	000800	00	0800	0.00	0		
					LABOR DESCRIPTION NOT FOUND							
002		1237185	856	19902512	877146	130075	02	80137	100.41	15000	0090	B
					DISC ASSEMBLY, BOTH REAR-RRR/REPLACE							
003		1237185	856	19902512	877146	130074	01	80127	100.41	15000	0090	✓
					DISC ASSEMBLY, BOTH FRONT-FRR/REPL							
004		1237185	818	19971204	872233	344111	01	8045	42.85	14855		
					BUSTER, RR BRCK LTP CLSG UNIT-REPL							
005		1237185	804	19971112	871429	322077	01	CS081	13.02	14746		
					PLATE, L-FRT-DR REH CTL MDL CUR-RPL							
006		1237185	802	19971120	871350	317891	03	84001	19.54	14678		
					DOOR ASM, LEFT FRONT-ALFRR							
007		1237185	882	19971116	871350	317892	02	84261	13.02	14678		
					STRIKER, LEFT-FRT-DR LOCK-REPLACE							
008		1237185	882	19971118	871350	317893	01	80137	97.68	14678	0090	E ✓
					DISC ASSEMBLY, BOTH REAR-RRR/REPLACE							
009		1237185	800	19971022	870489	309194	02	C7173	154.42	13780		
					WFO WERT COMP-SWITCH-PANS-REPLACE							
					PAIL-PART:25032803 CONTROL							
010		1237185	808	19971022	878609	309195	01	C2621	19.54	13780		
					CLOSE OUT, L-TP INULATOR-RRR/REPL							
011		1237185	733	19970716	866772	226008	03	C2790	13.02	12726		
					PLATE, CONSOLE TRM-REPLACE							
012		1237185	733	19970716	866772	226009	02	80137	97.68	12726		✓
					DISC ASSEMBLY, BOTH REAR-RRR/REPLACE							
013		1237185	733	19970716	866772	226010	01	80127	97.68	12726		
					DISC ASSEMBLY, BOTH FRONT-FRR/REPL							
014	I	1220424	585	19950126	005184	031001	01	Z7000	113.85	0		
					PASSENGER CAR AND TRUCK INV							

NO MORE CLAIMS FOR THIS VIN

WFO DESCRIPTION	SERV-TYPE: 800	DEL-TYPE: 010	WFO DESCRIPTION
E BODY			2 DOOR
COUPE			CADILLAC
V8 ENGINE			LD8 4.6 LITRE V8 MFI
U.S. FEDERAL EMISSIONS			AUTO TRANS
M01 F-4 AUTO TRANS			U19 INSTRUMENT CLUSTER
INFLATABLE RESTRAINT			ANTILOCK BRAKE
CJ2 AIR CONDITIONING			BUCKET SEATS
P008 ST BK PWR RECLINER			FRT DR ST BK PWR RECLIN
P01 SOFT SUSPENSION			M09 ELECTRONIC TRACTION CTL
POWER STEERING			TILT STEERING COLUMN

VIN: 1G4EL12Y18L612650 (CONTINUED)

WPO DESCRIPTION

009 DR/FRS WENGE ELEC
U18 RR/FR STEER CD
POWER WINDOW
A91 ELECTRIC TRUNK FULL DAM
C49 ELECTRIC DEFROSTER R/W
DAYTIME AND TWILIGHT
PEARL PAINT
98032 AIR BAG SEALING

RPO DESCRIPTION

U75 POWER ANTENNA
FLOOR CONSOLE
ELECTRIC DOOR LOCKS
CRUISE CONTROL
PULSE W/WIND WIPERS
U46 THEFT DETERRANT
YK3 LICENSE PLATE BRKT
MAJOR BEARD

END OF OPTIONS

1995 ALDORADO
 854 - PEARL RED
 134 - NEUTRAL SHALE LEATHER
 ORDER NO. [REDACTED] STOCK NO.
 VIN 1G6 RL12 Y1 8U612650

/V8G

CADILLAC MOTOR CAR DIVISION
 GENERAL MOTORS CORPORATION
 30009 VAN DYKE
 WARREN MI 48090-2350
 VEHICLE INVOICE 60D60885101

MODEL & FACTORY OPTIONS	MSRP	INV AMT	RETAIL - STOCK
000 ALDORADO	38220.00	33060.30	INVOICE 01/23/95
001 POWER LUMBAR SUPPORT	292.00	248.20	SHIPPED 01/23/95
000 MIRROR - AUTOMATIC DAY/NIGHT -	87.00	73.95	EXP I/T 01/28/95
007 ELECTRONIC COMPASS	100.00	85.00	INT CCM 01/28/95
009 50-STATE EMISSIONS	N/C	N/C	ERC EFF 01/23/95
001 HEATED FRONT SEATS	120.00	102.00	KEYS 64JR 96MR
008 4.6 L V8 DOHC NORTHSTAR ENGINE	0.00	0.00	WFF-6 MTK OPT-2
000 AUTO TRANSMISSION W/ OVERDRIVE	0.00	0.00	
005 CHROME WHEELS	1195.00	522.80	BANK: NATIONAL CI
007 TIRES - WHITEMALL P225/60 R16	76.00	64.60	CHG-TO 20-424
006 THEFT DETERRENT SYSTEM	295.00	250.75	
001 UNIVERSAL GARAGE DOOR OPENER	107.00	90.95	
009 SPORT INTERIOR	146.00	124.10	
008 RADIO SOUND SYS. (DELCO - BOSE)	972.00	826.20	
AM/FM ST. W/COMP. DISC & CASS.			SHIP WT: 3699
003 LICENSE PLT FRM MOUNT PROVISION	N/C	N/C	HP: 42.9
001 LEATHER SEATING AREA	650.00	552.50	
003 PEARL EXTERIOR COLOR	300.00	425.00	
134 NEUTRAL SHALE LEATHER	0.00	0.00	
060 PEARL RED	0.00	0.00	

MAN: STEV4
 MEMO 2138.00

TOTAL MODEL & OPTIONS 42760.00 36426.35 ACT 231 35778.95
 DESTINATION CHARGE 635.00 635.00 B/B 261 1282.00

TOTAL 43395.00 37061.35 PAY 310 37061.35

MEMO: TOTAL LESS HOLDBACK AND APPROX WHOLESALE FINANCE CREDIT 35205.25

THIS INVOICE MAY NOT REFLECT THE DEALER'S ULTIMATE VEHICLE COST IN VIEW OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, WHOLESALE FINANCE CREDIT, ETC.

TAYLOR CADILLAC INC
 P.O. BOX 2065
 TOLEDO

ON 43603-2065

1995 ELDERADO
 840. PEARL RED
 154. NEUTRAL SHALE LEATHER
 ORDER NO. V033YQ/U STOCK NO.
 VIN 1G6 EL12 Y1 EU612650

/V8G

CADILLAC MOTOR CAR DIVISION
 GENERAL MOTORS CORPORATION
 30009 VAN DYKE
 WARREN MI 48093-2350
 VEHICLE INVOICE 60D00885101

MODEL & FACTORY OPTIONS	MSRP	INV AMT	BANK COPY
66 ELDERADO	38220.00	33060.30	INVOICE 01/23/95
800 POWER LUMBAR SUPPORT	292.00	248.20	SHIPPED 01/23/95
850 MIRROR - AUTOMATIC DAY/NIGHT -	87.00	73.95	EXP I/T 01/28/95
807 ELECTRONIC COMPASS	100.00	85.00	INT COM 01/28/95
829 50-STATE EMISSIONS	N/C	N/C	PRC EFF 01/23/95
841 HEATED FRONT SEATS	120.00	102.00	
858 4.6 L V8 DOHC NORTHSTAR ENGINE	0.00	0.00	WFP-S MTH OPT-2
860 AUTO TRANSMISSION W/ OVERDRIVE	0.00	0.00	
805 CHROME WHEELS	1195.00	522.80	BANK: NATIONAL CI
807 TYRES - WHITENALL P225/60 R16	76.00	64.60	CHG-TO 20-424
846 THEFT DETERRENT SYSTEM	295.00	250.75	
821 UNIVERSAL GARAGE DOOR OPENER	107.00	90.95	
819 SPORT INTERIOR	146.00	124.10	
818 RADIO SOUND SYS. (DELCO - BOSE)	972.00	826.20	
800/PM ST. W/COMP. DISC & CASS.			SHIP WT: 3699
803 LICENSE PLT FRM MOUNT PROVISION	N/C	N/C	HP: 42.9
Y01 LEATHER SEATING AREA	650.00	552.50	
X13 PEARL EXTERIOR COLOR	500.00	425.00	
154 NEUTRAL SHALE LEATHER	0.00	0.00	
800 PEARL RED	0.00	0.00	

BILL OF SALE -- FOR VALUABLE CONSIDERATION
 CADILLAC HEREBY SELLS TO THE FINANCIAL
 INSTITUTION NAMED ON THE FACE HEREOF (GRANTEE) THE
 MOTOR VEHICLE DESCRIBED THERE. TO HAVE AND TO HOLD
 UNTO GRANTEE, ITS SUCCESSORS AND ASSIGNS FOREVER.
 CADILLAC COVENANTS WITH GRANTEE THAT IT IS
 LEAFUL OWNER OF SAID MOTOR VEHICLE, THAT IT
 HAS FULL POWER TO CONVEY THE SAME, THAT THE TITLE
 HEREBY CONVEYED IS FREE OF ALL ENCUMBRANCES, AND
 THAT IT WARRANTS AND WILL DEFEND SAID TITLE
 AGAINST THE CLAIMS OF ALL PERSONS.

DAN: STEV4

TOTAL MODEL & OPTIONS	42760.00	36426.35	ACT 231	35778.55
DESTINATION CHARGE	635.00	635.00	H/B 261	1282.80

TOTAL	43395.00	37061.35	PAY 310	37061.35

MEMO: TOTAL LESS HOLDBACK AND APPROX WHOLESALE FINANCE CREDIT		35205.25		

THIS INVOICE MAY NOT REFLECT THE DEALER'S ULTIMATE VEHICLE COST IN VIEW
 OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, WHOLESALE
 FINANCE CREDIT, ETC.

NATIONAL CITY BANK, NORTHWEST
 TAYLOR CADILLAC INC
 PO BOX 1688
 TOLEDO OH 43603-1688

FOR EARLY RELEASE OF DRAFT
 PLEASE CALL: NBD BANK, N.A.
 AT 1-800-572-7682

VINCENZI

DISPLAY VIN RELATED CAMPAIGNS

KIPBA06I

08/19/1999 15:18

1G6EL12Y1FU612650

OPEN\CLOSED STATUS:

SEL CAMPAIGN STATUS

REPAIR

REPAIR PREV.

CAMPAIGN

CODE NUMBER

DATE

DEALER NUMBER

TYPE

98032 OPEN / /

SAFETY

AIR BAG SENSING AND DIAGNOSTIC MODULE (SDM) SEALING FOR WATER INTRUSION

INQUIRY COMPLETE

PW:

PF 10 MANT 11 VHCP 12 DLRA 13 AUDT 14 XREF 15 DESC 16 ADST 17 NADR 18 DELT

19 PERF 20 21 22 23 24 PF-SELECT: GOTO:



**MIDWEST FAMILY MUTUAL
INSURANCE COMPANY**

Telephone • (612) 442-0200
16801 Wyzala Blvd., Minnetonka, MN 55305
Mailing Address:
P.O. Box 9425 • Minneapolis, MN 55440-9425

July 29, 1999

ESIS
485 W. Milwaukee
Detroit, MI 48232

RECEIVED

AUG 5 - 1999

ESIS-OM CLAIMS UNIT

RE: Our Claim No.: [REDACTED]
Our Insured: [REDACTED]
Your File No.: [REDACTED]
Your Client: General Motors Corp.
Date of Loss: 5/6/99

Dear Mr. Thrasher:

Enclosed please find documentation to support the above referenced claim.

Should you have any further questions and/or concerns regarding this matter, please feel free to contact me.

Sincerely,

Wendi Johnson

Wendi Johnson
Claims Representative

Direct: (612) 417-7036
Ext. 7099

WJds

Enclosure

Ms Diane R. Evans
Claims Administrator
ESIS/QM Claims Unit

ESIS

An Insurance Services Company

August 16, 1999

PO Box 02489
Detroit, MI 48202
Telephone 313.556.2631
Facsimile 313.974.7580

Midwest Family Mutual
ATTN: Ms. Wendi Johnson, Claims Representative
PO BOX 9425
Minneapolis, MN 55440-9425

RE: **OUR CLAIM NUMBER:** [REDACTED]
YOUR CLAIM NUMBER: 0222956WJ
DATE OF LOSS: May 6, 1999
CASE CAPTION: [REDACTED]

Dear Ms. Johnson:

I am writing to you on behalf of General Motors Corporation, who has authorized my employer, ESIS Inc. to act as a third party administrator with reference to this claim, and I have been assigned to handle the same. I have reviewed the file, and I still need the following information in order to process this claim:

1. The original or laser color copies of the photographs taken by your expert.
2. A copy of the total loss evaluation and the repair estimate performed by the appraiser.

Please forward this information as soon as possible so that a product analysis can be performed. Please call me if you have any further questions.

Sincerely,

Diane R. Evans

Cc: File



**NEWEST FAMILY MUTUAL
INSURANCE COMPANY**

Telephone • 612-445-8800

10001 Wayzata Blvd., Minneapolis, MN 55425

Mailing Address:

P.O. Box 9425 • Minneapolis, MN 55440-9425

August 25, 1999

Diane Evans
Esis Insurance Company
PO Box 02459
Detroit, MI 48202

RECEIVED

AUG 29 1999

ESIS-GM CLAIMS UNIT

RE: Our Claim No. [REDACTED]
Your Claim No. [REDACTED]
Case Caption: [REDACTED]
Date of Loss: 5/8/99

Dear Ms. Evans:

I'm writing you on that letter that we received requesting photocopies of our photographs and a copy of our total loss evaluation. I'm sending these out to you upon your request and I would like you to have notice of receipt and a quick response on this case. When you are done with the photographs, could you please send them back as we need them for our files. Please forward any information that you have onto us and we will be waiting for your return.

Sincerely,

Jeff Goergen
Claims Representative

Direct (612) 417-7036
Ext. 7036

JG/de

Ms Diane R. Evans
Claims Administrator
EMM/OM Claims Unit

ESIS

An Insurance Services Company

December 21, 1999

300 Renaissance Center
Mail Code 488-C30-D71
Detroit, MI 48265-3000
Telephone 1.800.888.0164
Facsimile 313.666.0911

Midwest Family Mutual Insurance
ATTN: Jeff Goergen
PO BOX 9425
Minneapolis, MN 55440-9425

RE: OUR CLAIM NUMBER: [REDACTED]
YOUR CLAIM NUMBER: [REDACTED]
DATE OF LOSS: May 6, 1999
CASE CAPTION: [REDACTED]

Dear Mr. Goergen:

I am writing to you on behalf of General Motors Corporation, who has authorized my employer, ESIS Inc. to act as a third party administrator with reference to this claim, and I have been assigned to handle the same. I have reviewed the file, and I still need the following information in order to process this claim:

1. Total loss evaluation.
2. Proof of payment.

Please forward this information as soon as possible so that a product analysis can be performed. Please call me if you have any further questions.

Sincerely,

Diane R. Evans

Cc: File



**MIDWEST FAMILY MUTUAL
INSURANCE COMPANY**

Telephone @ 812-646-8800

10001 Wayzata Blvd., Minneapolis, MN 55305

Mailing Address:

P.O. Box 8425 • Minneapolis, MN 55440-8425

December 30, 1999

Diane Evans
ESIS Insurance Company
P.O. Box 02489
Detroit, MI 48202

RECEIVED
JAN 05 2000
ESIS-GM CLAIMS UNIT

RE: Our Claim No. [REDACTED]
Your Claim No. [REDACTED]
Date of Loss: May 6th 1999
Case Caption: [REDACTED]

Dear Diane Evans,

I have recently received your letter asking for proof of payment and also the total loss evaluation. I have made photocopies of these for your investigation and I am sending these to you upon request and would like to have notice of receipt and a quick response on this case. Please forward any information you have on to us and we will be waiting for your return.

If you have any questions, I can be contacted at the number listed below. Thank you.

Sincerely,

Jeff Gougen
Claims Representative
(800) 225-5636
EXT 7036

ESIS

An Insurance Services Company

300 Renaissance Center
MAIL CODE 482-080-071
Detroit, MI 48265-3000

404906

313.968.3600 tel
313.968.0811 fax

May 18, 2000

State Farm Insurance Companies
ATTN: Mr. Javier Areas, Claims Representative
15055 SW 122 Avenue
Miami, FL 33186RE: OUR CLAIM NUMBER: [REDACTED]
YOUR CLAIM NUMBER: [REDACTED]
DATE OF LOSS: 7/23/99
CASE CAPTION: [REDACTED]

Dear Mr. Areas:

I acknowledge your letter dated May 10, 2000 and I am responding to the same.

State farm has the responsibility to prove their claim for damages. Part of proving a claim is proving your theory of liability, along with an expert report that states what the cause and origin of the alleged defect was, and how this is result of a GM product defect. There is nothing in the documentation presented thus far that substantiates a defect was the cause and origin of the loss. Without technical evidence to substantiate a defect, GM is unable to reimburse this claim based on general assumptions.

I am once again requesting this information, and if you have any further questions, please feel free to contact me.

Sincerely,

Diane R. Evans
Claims Administrator

Cc: File

CADILLAC MOTOR DIVISION
*** GM RESTRICTED ***

OT75078 PAGE #: 1
451-124

CASE NO:	99-0987207	VIN:	1G8ZB82T4VU841955
DATE OPENED:	07/26/1999	MODEL YR:	97
DATE CLOSED:	07/30/1999	SERIES:	ES SEVILLE SL8
SOURCE:	LEASER	MILEAGE:	028142
CUSTOMER:	[REDACTED]	STATE:	FL
ADDRESS:	[REDACTED]	MIAMI	FL [REDACTED]
HOME PHONE:	[REDACTED]	SUB. PHONE:	[REDACTED]

404906
D. Evans

***** GENERAL COMMENTS *****

DLESHP CALLED CLAIMING THAT ON 7/23/99 A 1997 SEVILLE SL8 STARTED ON FIRE WHICH THE DLESHP THINKS WAS CAUSED BY THE PRESSURE REGULATOR. THE INCIDENT HAPPENED AT SOUTH WEST 67TH AVENUE AND 62ND STREET IN MIAMI, FL AT ABOUT 5:30P.M. THE WEATHER AT THE TIME OF THE INCIDENT WAS SUNNY AND ABOUT 98 DEGREES. THE 1997 SEVILLE WAS THE ONLY VEHICLE INVOLVED IN THE INCIDENT. NO ONE WAS INJURED, BUT THE FRONT END OF THE VEHICLE HAD MELTED. THERE WAS NO POLICE REPORT FILED, BUT THE FIRE DEPARTMENT WAS CALLED TO THE SCENE OF THE INCIDENT. THE VEHICLE WAS LATER TOWED BY TED AND STAN TOWING TO THE DLESHP WHERE IT IS AT THE PRESENT TIME. SO THE PART THAT IS SAID TO BE DEFECTIVE IS THE PRESSURE REGULATOR.

ANDREW DOUGLAS/PHOENIX CENTER/43701
FORWARD TO P.A.R.T.

RECEIVED

MAR 16 2000

RECEIVED FILE AND WILL FORWARD TO PAR FOR FURTHER HANDLING.

EMS-GM CLAIMS UNIT

KETESA WALKER X3889

I CALLED THE OWNER AND STATED I HAVE HER FILE AND WOULD LIKE TO INSPECT THE VEHICLE TO FIND OUT WHAT HAPPENED. I STATED WE USE AN INDEPENDENT TO INSPECT AND IT COULD TAKE UP TO TWO WEEKS TO COMPLETE. I STATED I WILL FAX THE REQUEST FIRST THING TOMORROW. I HAVE THE OWNER THE \$600 & AND STATED IF SHE HAS ANY QUESTIONS TO PLEASE CALL.

OWNER THANKED ME.

LINDA SHAW PHOENIX CENTER 44160

WHEN I SPOKE TO THE OWNER SHE CLAIMED THERE WAS A POLICE REPORT, THE NUMBER IS 9094841. SHE STATED THERE WERE NO INJURIES AND SHE WAS THE ONLY PERSON IN THE VEHICLE. OWNER CLAIMED THE VEHICLE IS TOWED, BUT THERE WASN'T ANY MAJOR ISSUES IN THE VEHICLE.

LINDA SHAW EXT. 44160

MR. HENRY REICHEL CALLED TO LET ME KNOW HE WAS GOING TO GO BY THE CAR TO LOOK AT THE VEHICLE TOMORROW. HE STATED HE WILL ALSO CALL AND INTERVIEW THE OWNER.

LINDA SHAW

CADILLAC MOTOR DIVISION
*** GM RESTRICTED ***

J78378

PAGE #: 2

0 J52 0

PRESSURE REGULATOR CAUSED THE FIRE
CASE CLOSED BY SYSTEM

T01 0

PRESSURE REGULATOR CAUSED FIRE WITH VEHICLE
CASE CLOSED BY SYSTEM

THIS: BASE ACTION: C K 990027207

CAS 7/29/1999 10:37 CABS020M

NEXT: BASE ACTION: I KEY: 990027207

ID: H01LS

01 TITLE : INFORMATION

TYPE: GO

02 FIRST : MI: 04 LAST : YEARD

05 STREET :

06 CITY : MIAMI 07 ST: FL 08 ZIP :

09 B PHONE: 10 B PHONE:

11 COMPANY:

VEHICLE/DEALER INFORMATION

12 VIN : 1G6KS52Y4V0841955 ENG: 4.6L V8 275HP PLANT: HAMTRAMCK MI

13 YR/MDL : 1997 RS SEVILLE SLS 14 DEL : 08 02 97 15 MILEAGE: 025142

16 DEALER : WILLIAMSON CADILLAC COMPANY 17 ZN/DLR : 21 029

18 CITY : MIAMI 19 STATE : FL

CDE #	DESC	CDE COMMENTS
152	REGULATOR	20 PRESSURE REGULATOR CAUSED THE FIRE
T01	PRODUCT ALLEGAT	21 PRESSURE REGULATOR CAUSED FIRE WITH VEHICLE
		22
		23
		24

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSSECN PF18 DLRLC
 PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL

THIS: CDR ACTION: I KEY 990027207
NEXT: CDR ACTION: I KEY 990027207

CAS 7/29/1999 10:37 CAB030M
ID: H01LS

GENERAL COMMENTS

TOTAL CNTS: 3 TYPE: GO

USER: H00AD DATE: 07/26/99 TIME: 11:01 COMMENT #: 1
DLSEHP CALLED CLAIMING THAT ON 7/23/99 A 1997 SEVILLE SL'S STARTED ON
WHICH THE DLSEHP THINKS WAS CAUSED BY THE PRESSURE REGULATOR. THE
INCIDENT HAPPENED AT SOUTH WEST 67TH AVENUE AND 62ND STREET IN
MIAMI, FL AT ABOUT 5:30P.M. THE WEATHER AT THE TIME OF THE INCIDENT
WAS SUNNY AND ABOUT 95 DEGREE. THE 1997 SEVILLE WAS THE ONLY VEHICLE
INVOLVED IN THE INCIDENT. NO ONE WAS INJURED. BUT THE FRONT END OF THE
VEHICLE HAD MELTED. THERE WAS NO POLICE REPORT FILED. BUT THE FIRE
DEPARTMENT WAS CALLED TO THE SCENE OF THE INCIDENT. THE VEHICLE WAS
LATER TOWED BY TED AND STAN TOWING TO THE DLSEHP WHERE IT IS AT THE
PRESENT TIME. SO THE PART THAT IS SAID TO BE DEFECTIVE IS THE PRESSURE
REGULATOR.

ANDREW DOUGLAS/PHOENIX CENTER/43701

FORWARD TO P.A.R.T.

MORE: Y

PF13 BASE PF14 CNTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL

*I0004 TOP OF DATA DISPLAYED *

NAME: GREN ACTION: I KEY: 990027207

CAS 7/29/1999 10:37 CAB030M

TEXT: CMTS ACTION: I KEY: 990027207

ID: HOILS

GENERAL COMMENTS

TOTAL CMTS: 3

TYPE: GO

DATE: HOILS DATE: 07/26/99 TIME: 12:00 COMMENT #: 2

REVIEWED FILE AND WILL FORWARD TO PAR FOR FURTHER HANDLING.

DATE: HOILS DATE: 07/28/99 TIME: 16:27 COMMENT #: 3

I CALLED THE OWNER AND STATED I HAVE HER FILE AND WOULD LIKE TO INSPECT THE VEHICLE TO FIND OUT WHAT HAPPENED. I STATED HE USE AN INDEPENDENT TO INSPECT AND IT COULD TAKE UP TO TWO WEEKS TO COMPLETE. I STATED I WILL FAX THE REQUEST FIRST THING TOMMOROW. I GAVE THE OWNER THE 800 # AND STATED IF SHE HAS ANY QUESTIONS TO PLEASE CALL.

OWNER THANKED ME.

LEWIS SHAW PHOENIX CENTER 44160

MORE: N

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORREL PF24 CAL

*10005 BOTTOM OF DATA DISPLAYED *

THIS: CMTS ACTION: A KEY: 990027207
NEXT: CMTS ACTION: I KEY: 990027207

CAL 7/29/1999 10:39 CASS030M
ID: H01LS

GENERAL COMMENTS TOTAL CMTS: 3 TYPE: GO

DATE: TIME: COMMENT #:
WHEN I SPOKE TO THE OWNER SHE CLAIMED THERE WAS A POLICE REPORT. THE
NUMBER IS 9064901. SHE STATED THERE WERE NO INJURIES AND SHE WAS THE
PERSON IN THE VEHICLE. OWNER CLAIMED THE VEHICLE IS TOTALLED, BUT
THERE WASN'T ANY MAJOR ITEMS IN THE VEHICLE.

LEONDA SEAN ECT. 44160

MORE:
PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL
*10001 TYPE APPROPRIATE INFORMATION AND PRESS ENTER TO ADD *

THIS: CMTS ACTION: I KEY: 990027207

CAS: 07/18/1999 11:48 CABS030M

NEXT: CMTS ACTION: I KEY: 990027207

ID: HOLLIS

GENERAL COMMENTS

TOTAL CMTS: 12

TYPE: GC

USER: HOLLIS DATE: 07/29/99 TIME: 10:41 COMMENT #: 4

WHEN I SPOKE TO THE OWNER SHE CLAIMED THERE WAS A POLICE SUBJECT. THE
NUMBER IS 9094901. SHE STATED THERE WERE NO INTERIORS AND SHE WAS THE
ONLY PERSON IN THE VEHICLE. OWNER CLAIMED THE VEHICLE IS TOWED, BUT
THERE WASN'T ANY MAJOR ITEMS IN THE VEHICLE.

LINDA SHAW EXT. 44160

USER: HOLLIS DATE: 07/29/99 TIME: 15:46 COMMENT #: 5

SAA HENRY SECKEL CALLED TO LET ME KNOW HE WAS GOING TO GO BY THE
BUS TO LOOK AT THE VEHICLE TOMORROW. HE STATED HE WILL ALSO CALL
AND INTERVIEW THE OWNER.

LINDA SHAW

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSEHCN PF18 DLRLC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORSEL PF24 CAL

THIS: CMTS ACTION: I KEY: 990027207

08/18/1999 11:49 CABS030M

NEXT: CMTS ACTION: I KEY: 990027207

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

USER: H01LS DATE: 08/02/99 TIME: 08:44 COMMENT #: 6

FOA INSPECTOR CALLED AND STATED HE HAS COMPLETED THE INSPECTION AND
HE IS SENDING THE REPORT THIS WEEK.

I STATED I WILL WAIT TO RECEIVE IT AND THANKED HIM FOR HIS HELP.

LINDA SHAW 44160

USER: H02KG DATE: 08/04/99 TIME: 09:05 COMMENT #: 7

OWNER CALLED AND STATED SHE WANTED TO SPEAK WITH YOU. I ADVISED
OWNER THAT YOU WEREN'T AVAILABLE AND THAT I WOULD HAVE YOU RETURN HER
CALL. THE OWNER THANKED ME AND ENDED THE CALL.

NATASHA GORDON EXT 43703 PONTIAC PHOENIX CENTER

>>>> LN TO LINDA SHAW >>>>

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORREL PF24 CAL

THIS: CMTS ACTION: I X 990027207

CAS 08/18/1999 11:49 CABS030M

NEXT: CMTS ACTION: I KEY: 990027207

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

USER: H01LS DATE: 08/04/99 TIME: 10:52 COMMENT #: 8

I RETURNED THE OWNERS CALL. SHE WANTED TO KNOW IF I HAD THE REPORT FROM THE INSPECTOR. I TOLD HER IT HASN'T COME IN YET. BUT AS SOON AS I RECEIVE IT I WILL CALL HER.

LINDA SHAW

44160

USER: H02SR DATE: 08/05/99 TIME: 15:50 COMMENT #: 9

OWNER CALLED SEEKING UPDATES SHE ASKED TO SPEAK LINDA SHE WAS NOT AVAILABLE I ADVISED HER I WOULD LEAVE A MESSEGE FOR LINDA TO RETURN HER CALL

LN TO LINDA

SHANA ROWSER PHOENIX CENTER-3669

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DIRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORRSEL PF24 CAL

THIS: CMTS ACTION: I K 990027207

CAS 08/18/1999 11:49 CABS030N

NEXT: CMTS ACTION: I K 990027207

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

USER: H01LS DATE: 08/04/99 TIME: 10:52 COMMENT #: 8

I RETURNED THE OWNERS CALL. SHE WANTED TO KNOW IF I HAD THE REPORT FROM THE INSPECTOR. I TOLD HER IT HASN'T COME IN YET BUT AS SOON AS I RECEIVE IT I WILL CALL HER.

LINDA SHAW

44160

USER: H02SR DATE: 08/05/99 TIME: 15:50 COMMENT #: 9

CMSR CALLED SEEKING UPDATES SHE ASKED TO SPEAK LINDA SHE WAS NOT AVAILABLE I ADVISED HER I WOULD LEAVE A MESSEGE FOR LINDA TO RETURN HER CALL.

LN TO LINDA

SHAW BOMBER PHOENIX CENTER-3669

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORSEL PF24 CAL

THIS: CMTS ACTION: I KEY: 990027207
NEXT: CMTS ACTION: I KEY: 990027207

CAS 8/18/1999 11:50 CAB9030M
ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

ISSUE: H01LS DATE: 08/06/99 TIME: 09:38 COMMENT #: 10

I HAVE RECEIVED THE INSPECTION REPORT AND CALLED THE OWNER TO DISCUSS. THE INSPECTOR INDICATED IN THE REPORT DUE TO THE SEVERE DAMAGE IN THE ENGINE COMPARTMENT THE ACTUAL CAUSE AND ORIGIN OF THE FIRE COULD NOT BE DETERMINED. I STATED SINCE THE INSPECTOR WASN'T ABLE TO DETERMINE THE CAUSE I WOULDN'T BE ABLE TO CONTINUE WORKING ON THIS FILE. I STATED WE WILL NOT ABANDON HER CONCERNS HOWEVER. I WILL FORWARD THE FILE TO OUR CLAIMS ADJUSTOR. I GAVE THE OWNER THE NAME AND ADDRESS OF ESIS.

CLOSING THE FILE AND FORWARDING TO ESIS.

LINDA SHAW PHOENIX CENTER 44160

MORE: Y

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSE\$CN PF18 DLRLOC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPBNLST PF23 CORSEL PF24 CAL

THIS: CMTS ACTION: I KEY: 990027207

CAS 08/18/1999 11:50 CAB030M

NEXT: CMTS ACTION: I KEY: 990027207

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

USER: HQ088 DATE: 08/06/99 TIME: 13:00 COMMENT #: 11

HAVIERE FROM STATED FARM INSURANCE CALLED TO SPEAK WITH LINDA. LINDA
NOT AVAILABLE SO I LEFT A MESSAGE FOR HER.

SARA STERD X43860

PHOENIX CENTER

MORE: Y

PF13 BASE	PF14 CMTS	PF15 AFTRCL	PF16 CLOSE	PF17 CSESCN	PF18 DLRLC
PF19 CRIS	PF20 TELLST	PF21 LITLST	PF22 OPENLST	PF23 CORSEL	PF24 CAL

THIS: CME ACTION: I 990027207

CA 6/18/1999 11:50 CAB9030M

NEXT: CME ACTION: I 990027207

ID: H01LS

GENERAL COMMENTS

TOTAL CMTS: 12 TYPE: GC

FROM: H01LS DATE: 08/08/99 TIME: 13:25 COMMENT #: 12

I CALLED THE OWNER AND STATED I HAD RECEIVED A MESSAGE FROM HER
INSURANCE COMPANY. I STATED I AM NOT ABLE TO WORK WITH INSURANCE CO.
ANYMORE. I STATED EGIS GIVES ONLY THE ADDRESS TO HAVE THE INITIAL
CONTACT BE WRITTEN. I THANKED THE OWNER AND WISHED HER A GOOD DAY.

OWNER STATED SHE TOLD THE GENTLEMAN THAT I DIDN'T WORK WITH THE
INSURANCE CO. SHE STATED SHE WOULD CALL HIM AND LET HIM KNOW TO WRITE
SHE THANKED ME FOR CALLING HER AND ENDED THE CALL.

LINDA SHAW

44160

MORE: N

PF13 BASE PF14 CMTS PF15 AFTRCL PF16 CLOSE PF17 CSESCN PF18 DLRLC
PF19 CRIS PF20 TELLST PF21 LITLST PF22 OPENLST PF23 CORREL PF24 CAL

*10005 BOTTOM OF DATA DISPLAYED *

THIS: CLOSE ACTION: I KEY: 990027207

CA 06/18/1999 11:50 CAB040M

NEXT: CLOSE ACTION: I KEY: 990027207

ID: H01LS

NAME: NANCY BRARD MIAMI, FL

YR/MDL: 1997 KS TYPE: GC

CASE CLOSING INFORMATION

FILE RETENTION	: 10	POSSIBLE SAFETY	: Y (Y/N)
CONTACT DATE	: 07 26 99	DLR CONCLUSION DATE	: 07 26 99
CLOSING DATE	: 07 30 99	RESPONSIBLE DEALER	:
CUST SATISFIED	: Y (Y/N)	CLOSE CASE	: Y (Y/N)
CO REVIEW CLOSE	:	CO REVIEWED	: (Y/N) DATE:
RGN REVIEW CLOSE	:	RGN REVIEWED	: (Y/N) DATE:

CDE #	DESC	CDE COMMENTS
J52	0 REGULATOR	PRESSURE REGULATOR CAUSED THE FIRE CASE CLOSED BY SYSTEM

T01	0 PRODUCT ALLEGAT	PRESSURE REGULATOR CAUSED FIRE WITH VEHICLE CASE CLOSED BY SYSTEM
-----	-------------------	--

MORE: N

PF13	BASE	PF14	CMTS	PF15	AFTRCL	PF16	CLOSE	PF17	CSDESCN	PF18	DLRLOC
PF19	CRIS	PF20	TELLST	PF21	LITLST	PF22	OPENLST	PF23	CORRSEL	PF24	CAL

*00435 CASE IS CLOSED *

TEXT:

WARRANTY HISTORY INQUIRY
(UPDATED THRU 19990727)

PAGE 01 OF 03
DIV: CADILLAC

VEHICLE-ID-NUMBER	DESCRIPTION	ODM	DEL-DLR	DEL-DATE	DEL-ODOM	PDI-BLIG	CLM
100000274V0641995	SEVILLE SLS	M	1221029	19970602	15	PAID	9

DTE: 19970610 DELNAR-DATE: WARBLK-DTE:
 INV-DTE : 19970721 DELNAR-ODOM: WARBLK-TYP:
 INV-DLR : 1221029 SHIP-TO-DLR: 1221029

C	CYCLE							AUTH	AUTH		
T	RODLR	NO.	RODATE	RO-NO.	DOC-NO	LN	LEROP	LN-TOTAL	ODOMETER	ID	CODE
001	1221029	955	19990428	119444	119124	02	C2770	87.29	23146		
			ASH TRAY, FRT-CONSOLE-REPLACE FAIL-PART:25649709 ASHTRAY								
002	1221029	955	19990428	119444	119125	01	N0110	142.49	23146		
			BATTERY, ONE-REPLACE FAIL-PART:19001631 BATTERY								
003	1221029	804	19971107	075496	323106	01	N9995	12.42	4510	0090	B
			CUSTOMER CONCERN NOT DUPLICATED								

----- CONTINUED -----

PF1:HELP PF2:OPT PF3:CHG-DIV PF4:MAIN MENU PF5:DESC PF6:PRINT
 PF7:BACK PF8:FWRD PF9:GOTO PF10:LOGOFF

RECORD FOUND

NEXT:
VIN : 1G6KS52Y4VU841955

WARRANTY HISTORY INQUIRY
(UPDATED THRU 19990727)

PAGE 02 OF 03
CLAIM CNT: 9
DIV: CADILLAC

AUTH AUTH

C	T	RODLR	NO.	RODATE	RO-NO.	DOC-NO	LN	LBROP	LN-TOTAL	ODOMETER	ID	CODE
		1221029	803	19971107	075496	318151	03	R4060	37.25	4510		
		ACTUATOR MOTOR, FUEL DR LK-R&R/REPL										
005		1221029	803	19971107	075496	318153	01	N6360	24.83	4510		
		WIRE/CONN, INST PANEL-REPAIR										
006		1221029	740	19970925	071463	270178	01	N3647	37.25	3430		
		TRANSMISSION ASM, BOTH W/S WPR-REPL										
007		1221029	737	19970909	069993	254087	01	J0667	59.11	1153		
		BELT, SERPENTINE DRIVE-REPLACE										
		FAIL-PART:04060835 NOT FOUND										
008		1221029	738	19970822	068577	259003	01	N1410	171.22	609		
		LAMP ASM, R-BACK-UP-REPLACE										
		FAIL-PART:16523420 LAMP ASM,										
009	I	1221029	730	19970721	A41955	841955	01	Z7000	99.33	0		
		PASSENGER CAR AND TRUCK NVI										

----- NO MORE CLAIMS FOR THIS VIN -----

PF1:HELP
PF7:BACK

PF2:OPT
PF8:FWRD

PF3:CHG-DIV
PF9:GOTO

PF4:MAIN MENU
PF10:LOGOFF

PF5:DESC

PF6:PRINT

NEXT:

WARRANTY HISTORY INQUIRY

PAGE 03 OF 03

WARRANTY-RELATED OPTIONS/VEHICLE INFORMATION DIV: CADILLAC

VIN: 1GCKS82Y4VU841955 ORD-TYPE: 070 SERV-TYPE: 000 DEL-TYPE: 010

RPO DESCRIPTION

RPO DESCRIPTION

K BODY
SEDAN
V8 ENGINE
U.S. FEDERAL EMISSIONS
AUTO TRANS
UY9 INSTRUMENT CLUSTER
ANTILOCK BRAKE
POWER STEERING
DD0 DR/PASS REMOTE ELEC
U1L RADIO AM/FM CASS
VK3 LICENSE PLATE BRKT

4 DOOR
CADILLAC
LD8 4.6 LITRE V8 MFI
MX0 AUTO TRANS W/OVERDRIVE
MH1 F-4 AUTO TRANS
AK5 INFLAT RESTRAINT DR/PAS
CJ2 AIR CONDITIONING
TILT STEERING COLUMN
U75 POWER ANTENNA
POWER WINDOW

----- END OF OPTIONS -----

PF1:HELP
PF7:BACK

PF2:OPT
PF8:FWRD

PF3:CHG-DIV
PF9:GOTO

PF4:MAIN MENU
PF10:LOGOFF

PF5:DESC

PF6:PRINT

Facsimile Cover Sheet

EAA Contact :	Kathy Smith
Phone/Fax:	(248) 642-3232 248-642-4558
Subject:	P.A.R. Investigation
File #:	990027207
Claimant:	[REDACTED]
Vehicle (Model -Year):	352Y4VU841955
Vehicle Location:	WILLIAMSON CADILLAC COMPANY MIAMI, FLORIDA 305-870-7100
Contacts(Name/ #)	[REDACTED]
Divisional Contact:	LINDA SHAW
Division:	Cadillac/ PAR Investigations
Address:	[REDACTED]
	Pontiac, MI 48342
Phone/Fax:	248-874-4160 / 248-874-4291
Sir / EDRU Cartridge:	Mass Cartridge <input type="checkbox"/> 8.0v <input type="checkbox"/> 7.0v <input type="checkbox"/> ** OBD II Cable & VIM **'96 U-Vans, Venture, Trans Sport, 91hours requirements **Buick, Cadillac requirements for '97-'98 OBD II
Date	JULY 26, 1999
Pages including this cover page:	#8
<p><i>The information contained in this facsimile is confidential and may also be client privileged. The information is intended only for the use of the individual or entity to whom it is addressed. If you are not the intended recipient, or the agent or employee responsible to deliver it to the intended recipient, you are hereby notified that any use, dissemination, distribution or copy of this communication is strictly prohibited. If you have received this facsimile in error, please immediately notify us by telephone, and return the original message to us at the address above via the U. S. Postal Service. Thank You.</i></p>	

Please Use Form:

- Accelerator/throttle
- Brake/ABS/TC System(s)
- Steering/Suspension/Tires & Wheels
- Side Impact
- Fire (Collision)

- Fire (Non-collision)
- Hood/Hood Latch
- Restraint-SIR/Seatbelts
- Seats
- Transmission/Transaxle

Special Instructions:

- Do not interview owner
- Interview Owner
- Remove & Return Part
- Contact PAR Team Member
- Other _____

EAA Internal Use Only

- Chevrolet 250-_____
- Buick 648-_____

- Pontiac/GMC 365-_____
- Cadillac 277-_____

- Oldsmobile 649-_____
- # of Pages Transmitted:** _____

To: SA: _____
From: **Kathy Smith**

Phone: _____
Date Faxed to SA: ___/___/___

Fax: _____
Due Date: ___/___/___

EAA SA Use Only

Acceptance/Investigation: YES NO
Please acknowledge acceptance of this case promptly by phone or fax.

Report Mailed USPS Priority: _____ Date mailed: ___/___/___
Please report completion date by phone or fax.

HENRY SECKEL
20949 BOCA RIDGE DRIVE SOUTH
BOCA RATON, FL. 33428
561 488 3760
FAX 561 883 9444

REF: G011559A

CADILLAC PRODUCT ALLEGATION RESOLUTION TEAM
ATTENTION: LINDA SHAW
MAIL STOP 483-616-830
16 EAST HUDSON STREET
PONTIAC, MI 48342

DATE:08-01-99

CASE
NAME

PAGE 1 OF 2

ATTACHED PLEASE FIND:
PRODUCT ALLEGATION RESOLUTION REPORT. FIRE (NON-COLLISION)
FIELD PHOTOGRAPHIC NOTES
34 PHOTOS (1 SET OF PRINTS) WITH LAST 6 DIGITS OF VIN & NEGATIVE # STAMPED ON BACK
4 REPAIR ORDERS.

ADDENDUM TO PRODUCT ALLEGATION RESOLUTION REPORT
FIRE (NON-COLLISION)

PLEASE NOTE OWNERS CORRECT LAST NAME. VEHICLE WAS INSPECTED AT WILLIAMSON CADILLAC CO. IN MIAMI FL. ON 07-30-99. EXCEPT FOR THE FRONT GRILL & BUMPER ASSEMBLY, THE RIGHT FRONT FENDER AND RIGHT FRONT OF HOOD THERE WAS NO HEAT DAMAGE TO THE EXTERIOR OF THE CAR. FOR MORE INFORMATION, SEE PHOTOS AND DETAILED PHOTOGRAPHIC NOTES. THE MOST EXTENSIVE HEAT DAMAGE IS TO THE RIGHT FRONT OF THE ENGINE COMPARTMENT AND THE RIGHT FRONT FENDER. THE EXTERIOR OF THE R/F HOOD HAS ALL PAINT BURNT OFF AND THE INTERIOR HOOD REINFORCEMENT IS BADLY BUCKLED AND DISTORTED. THE R/F FENDER IS BARE OF PAINT AND THE FENDER WHEEL WELL IS GUTTED. THE TOP OF THE RADIATOR AND PLASTIC PANEL IS PARTIALLY MELTED, THE BATTERY CASE HAS PARTIALLY MELTED ON TOP AND THE SIDE, BUT BOTH BATTERY CABLES ARE STILL ATTACHED. THE MAIN WIRING HARNESS ALONG THE FRONT CROSS MEMBER IS COMPLETELY BARE OF INSULATION AND THE WIRES ARE OF A DARK RED COLOR. IT APPEARS THAT THE POSITIVE BATTERY CABLE TO THE LEFT SIDE OF THE CAR HAS PARTIALLY SEPARATED IN THE MIDDLE OF THE CROSS MEMBER BETWEEN THE TWO RETAINER CLAMPS. SEE PHOTO #27. SOME OF THE WIRES ARE BEADED. THERE IS NO VISIBLE CAUSE FOR THIS CONDITION UNLESS THE FRONT BUMPER HAD SOME INTERFERENCE. THE POSITIVE CABLE NEAR THE LEFT HEADLIGHT ASSEMBLY STILL HAS THE RED INSULATION. ON THE COWL THE HEATER/AC BLOWER MOTOR HAS SEPARATED FROM THE HOUSING AND THUS ALLOWED THE HEAT TO DAMAGE THE INTERIOR OF THE COWL AND CARPETING NEAR THE ACCELERATOR PEDAL. THIS APPEARS TO BE THE ONLY DAMAGE TO THE INTERIOR PASSENGER COMPARTMENT.

IT APPEARS THAT SOMEBODY SUGGESTS THAT THE CAUSE OF THE FIRE IS DUE TO THE LEAKING FUEL PRESSURE REGULATOR WHICH THE DEALER HAD REPLACED. THE INSPECTION OF THE REGULATOR REVEALED THAT FUEL PRESSURE REGULATOR APPEARS TO HAVE BEEN PROPERLY INSTALLED. THE PLASTIC FUEL EXHAUST HOSE WAS PARTIALLY MELTED. THE REGULATOR WAS REMOVED AND DISASSEMBLED FOR INSPECTION. THE OUTER HOUSING WAS INTACT, ALL "O" RINGS IN REGULATOR AND ON TOP OF FUEL INJECTOR WERE UNDAMAGED AND IN PLACE, THE REGULATOR AND THE REGULATOR RETAINER CLIP WERE PROPERLY INSTALLED SEE PHOTO # 23. AND ALSO THERE WAS NO HEAT DAMAGE TO THE INJECTOR OR THE INJECTOR TERMINAL. THE INJECTOR FUEL RAIL APPEARS TO BE UNDAMAGED. THE ONLY POSITIVE IDENTIFIABLE FUEL LEAK COULD HAVE COME FROM THE FUEL REGULATOR EXHAUST HOSE OR THE HEAT DAMAGED FLEX FUEL HOSES CONNECTING THE FUEL LINES TO THE INJECTOR FUEL RAILS AND THE FUEL LINES COMING UP FROM THE COWL. WHAT CAUSED THE FLEX FUEL LINES PHOTO # 21 AND THE REGULATOR EXHAUST LINE TO BE DAMAGED IS UNCLEAR. THE WIRING TO THE EVAP SYSTEM SOLENOID IS BARE AND HEAT DAMAGED. MOST OF THE ENGINE FUEL CONTROL WIRING HARNESSSES ARE ALSO HEAT DAMAGED. THE WIRING TO THE CATALYTIC CONVERTER OXYGEN SENSOR IS BURNT. THE CATALYTIC CONVERTER AND EXHAUST SYSTEM IS NOT HEAT DISTORTED OR HAS ANY INDICATION OF FLUID LEAKS. EXCEPT FOR THE LEFT OUTER AXLE BOOT WHICH IS LEAKING GREASE THERE IS NO LEAK FROM ANY POWER TRAIN COMPONENT. WIRING HARNESS TO THE REAR ALONG THE RIGHT SIDE OF THE CAR IS HEAT DAMAGED. ON THE RIGHT AXLE SHAFT BOTH INNER AND OUTER AXLE BOOTS ARE BURNT. (THAT IS THE SIDE OF THE BURNT R/F TIRE). THE TWO HOT SPOTS IN THE ENGINE COMPARTMENT ARE IN THE RIGHT FRONT CORNER AND THE LEFT REAR AREA NEAR THE BRAKE MASTER CYLINDER AND THE COWL HEATER HOSES NEAR RIGHT SPRING TOWER ARE OK. THE WIRING HARNESSSES NEAR THE LEFT SPRING STRUT TOWER ARE OVERHEATED AND BARE OF INSULATION AS WELL AS THE WIRING HARNESS AT THE BRAKE BOOSTER BOTH ON TOP AND BOTTOM. THE WIRING HARNESS TO THE BCM AT THE LEFT INNER FENDER IS UNDAMAGED. ALL UNDAMAGED FUSES IN THE ENGINE COMPARTMENT ARE OK. IN THE TRUNK FUSE PANEL THE FOLLOWING FUSES ARE BLOWN: 10 AMP IGNITION BODY, 10 AMP IGNITION RELAY, 20 AMP BSS, POWER SS, RADIO, 10 AMP RIGHT PARKING LAMP. DUE TO THE SEVERE DAMAGE IN THE ENGINE COMPARTMENT THE ACTUAL CAUSE AND ORIGIN OF THE FIRE COULD NOT BE DETERMINED. *

GM-PAN, Pts NC, Rev. 06/20/97

PRODUCT ALLEGATION RESOLUTION
FORM (NON-COLLISION)

Page 1 of 6

Division: CADILLAC	RAW: 990027207	VIN: 1G6KS52Y4VU844955
Customer Name (Last, First): [REDACTED]		

Inspected By: H. SECKEL Organization: E.A.A.
 Phone: (561) 488-3760x Inspection Date: 07/30/99 Mileage at Inspection: UNKNOWN
LAST MILEAGE 25142

***** I INSPECTION SUMMARY *****

Following the inspection, summarize the tests and observations.

SEE APPENDUM

***** II INTERVIEW - VEHICLE HISTORY *****

(Note: Please indicate name, address & phone number of person being interviewed): _____

1. Vehicle modifications or after-market equipment? (e.g. radio, phone, CD, tires, wheels, trailer hitch/wiring, trailer brake controller, hydraulic lines, alarm system, etc.)

Item(s), date installed, and by whom (name, phone) NO AFTER MARKET EQUIPMENT.

2. Any prior collision damage? (when, where, extent, repaired by, etc.) NO PRIOR DAMAGE

3. For the following systems, list and describe prior repairs or concerning problems/complaints at time of incident (e.g. no starts, stalls, overheating, loss of coolant, warning lights "On", strange odors, leaks, fluid leaks on driveway, engine noise, engine misf, etc.):

Cooling System (Y/N) N; Repairs (None, Partial, Unrepaired) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

A/C System (Y/N) N; Repairs (None, Partial, Unrepaired) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

Steering System (Y/N) N; Repairs (None, Partial, Unrepaired) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

Transmission (Y/N) N; Repairs (None, Partial, Unrepaired) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

GM-PAS-Fm NC, Rev. 6/24/96

Division Ref# 990027207

VDML Ref# P1 _____

Page 2 of 6

***** II INTERVIEW - VEHICLE HISTORY (Continued) *****

Electrical Systems (Y/N) Y; Repairs (None, Satisfied, Unsatisfied) S Repaired by (GM, Non-GM, Owner/Other) GM

Describe INSTRUMENT PANEL DISPLAYS

Fuel System (Y/N) Y; Repairs (None, Satisfied, Unsatisfied) Y Repaired by (GM, Non-GM, Owner/Other) GM

Describe FUEL PRESSURE REGULATOR

Exhaust System (Y/N) Y; Repairs (None, Satisfied, Unsatisfied) S Repaired by (GM, Non-GM, Owner/Other) GM

Describe RATTLE IN EXHAUST PIPE

Major Engine (Y/N) N; Repairs (None, Satisfied, Unsatisfied) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

Brake/ABS/TCS System (Y/N) N; Repairs (None, Satisfied, Unsatisfied) _____ Repaired by: (GM, Non-GM, Owner/Other) _____

Describe _____

Body (Y/N) Y; Repairs (None, Satisfied, Unsatisfied) S Repaired by (GM, Non-GM, Owner/Other) GM

Describe TRIM

Other (Y/N) Y; Repairs (None, Satisfied, Unsatisfied) S Repaired by (GM, Non-GM, Owner/Other) GM

Describe WINDSHIELD WIPERS

Regular maintenance (e.g., oil changes, belts, hoses, etc.) Done by: (GM, Non-GM, Owner/Other) GM

Maintenance records? (Y/N) Y Date/description of last maintenance/repair (by whom?) _____

Any other pertinent vehicle history information (from interviewee or GM Warranty History)? N

Name and address of service who towed (include tow driver's name), stored and/or provided temporary service to the vehicle
TED A STAN TOWING IN MIAMI FL

How was vehicle towed? (Flat bed, dolly, sling, front or rear lift) UNKNOWN If towed on wheels, how far? _____

***** III INTERVIEW - INCIDENT DETAILS *****

***** III A INTERVIEW - IMMEDIATELY BEFORE THE FIRE *****

If vehicle is a truck, or a car trailing cargo at the time of the incident, estimated total weight of cargo and trailer (in lbs) _____
load description N/A load location _____

Driver's physical description (gender, age, height, weight, dismember) _____

If vehicle's ignition was "Off" prior to fire, for how long was it "Off"? _____ Were all doors locked? (Y/N) _____

Drive length (if vehicle was parked prior to fire, describe last drive): Hrs. _____ Mins. _____ Distance traveled _____

If not parked, vehicle speed estimate 5 MPH Source of estimate DRIVER-OWNER Posted speed _____ MPH

Fuel gauge reading (Empty, 1/4, 1/2, 3/4, Full) 1/4 When last fueled? Y

Exact incident location 67th AVE + 67 STREET IN MIAMI FL

Weather conditions and visibility SUNNY

Approx. temperature 95 °F. Any physical visual obstructions? NO

***** III A INTERVIEW - IMMEDIATELY BEFORE THE FIRE (Continued) *****

Road: Concrete, Asphalt, Gravel, Crushed Rock, Dirt, or Other? A Describe: _____
 Shoulder: Concrete, Asphalt, Gravel, Crushed Rock, Dirt, or Other? _____ Describe: _____
 Road condition: Wet, Dry, Icy or Other? OK If other, specify _____
 Shoulder condition: Wet, Dry, Icy or Other? OK If other, specify _____
 Describe brake operation: (pedal feel, brake pull or grab, vibration, normal, etc.) NO BRAKES
 Any warning lights "On", high/low gauge readings, or messages displayed? (Y/N) _____ Describe UNKNOWN

Electrical systems operation: (normal, other?) _____

Mark an "X" before all electrical systems/devices which were "On" or "Cycled" immediately prior to the incident: -

- | | | |
|--|---|---|
| <input type="checkbox"/> Cruise Control | <input type="checkbox"/> Windshield Wipers | <input type="checkbox"/> Radio, Built-in Tape/CD Player |
| <input type="checkbox"/> Traction Control Switch "On" | <input checked="" type="checkbox"/> Air Conditioner, on "Max"? (Y/N) <u>?</u> | <input type="checkbox"/> Auxiliary CD Player |
| <input type="checkbox"/> Low Beam Headlights | <input type="checkbox"/> Heater | <input type="checkbox"/> Telephone |
| <input type="checkbox"/> High Beam Headlights | <input type="checkbox"/> Windshield Defogger | <input type="checkbox"/> CB Radio |
| <input checked="" type="checkbox"/> Daytime Running Lights | <input type="checkbox"/> Windshield Defroster | <input type="checkbox"/> Power Window Controls |
| <input type="checkbox"/> Fog Lamps | <input type="checkbox"/> Rear Window Defroster | <input type="checkbox"/> Power Mirror Controls |
| <input type="checkbox"/> Turn Signal | <input type="checkbox"/> Outside Mirror Heater | <input type="checkbox"/> Power Seat Controls |
| <input type="checkbox"/> Hazard Flashers | <input type="checkbox"/> Driver Seat Heater | <input type="checkbox"/> Power Sun Roof Controls |
| <input type="checkbox"/> Map Lights, Ft _____ Rr _____ | <input type="checkbox"/> Passenger Seat Heater | <input type="checkbox"/> Cigar Lighter |
| <input type="checkbox"/> Other Interior Lights | <input type="checkbox"/> Auxiliary Power Outlet | <input type="checkbox"/> Other _____ |

Steering operation: (normal, other?) NORMAL

Powertrain: (any engine misf, sluggish, surge, stall, loss of power or speed, etc.?) SLUGGISH

OWNER STATED CAR LOST POWER, WOULD NOT RUN FASTER WITH GAS

Any unusual noises (bang, pop, tick, grinding, metallic, roar, etc.)? From where? THUMP PEDAL ALL THE WAY DOWN
 Did it appear to match engine speed? (Y/N) OWN

Describe any unusual odors. From where? NO

Any smoke? (from where, color, intensity, etc.) NO

Was anyone smoking? (Y/N) N. How long since someone last smoked in the vehicle? NO SMOKING IN CAR

***** III B INTERVIEW - AT BEGINNING & DURING THE FIRE *****

Any flames? (from where, color, intensity, etc.) UNDER CAR & HOOD

Any steam or smoke? (from where, color, intensity, etc.) SMOKE UNDER HOOD

Any apparent malfunction of: Cooling System? (Y/N) _____ Power Steering? (Y/N) N Auto Transmission? (Y/N) _____
 Electrical Systems? (Y/N) _____ Fuel System? (Y/N) _____ Exhaust System? (Y/N) _____ Engine? (Y/N) _____ Brake System? (Y/N) _____
 Other? (Y/N) _____ Describe: _____ Warning Lights? (Y/N) _____
 Gauges? (Y/N) _____ If so, describe: _____

What did you do after you realized something was wrong? Pull Over? (Y/N) Y Lower Windows? (Y/N) _____ Raise Windows? (Y/N) _____ Turn Engine Off? (Y/N) _____ Turn on Hazard Flashers? (Y/N) _____ Exit Vehicle? (Y/N) _____
 Open Hood? (Y/N) YES Open Trunk? (Y/N) _____ Other? (Y/N) _____ Describe _____

***** III B INTERVIEW - AT BEGINNING & DURING THE FIRE (Continued) *****

Any other comments or observations that have not been covered? OWNER-DRIVER STATED CAR SLOWED DOWN & DRIVER IN CAR IN FRONT OF HER NOTICED FLAMES UNDER ENGINE. HE MOTIOLED FOR HER TO STOP & GET OUT OF CAR.

***** IV - VEHICLE INSPECTION *****

The vehicle inspection documents the physical evidence via color photographs and written observations. It is important to also document what does not appear to be related to the fire. This is necessary because fire cause determination often involves the process of elimination. By recording your observations in the following section, you will be following a methodical inspection format.

A. Take color photographs of the following and enter observations/comments on the form:

Left & right side exterior SEE PHOTOS & PHOTOGRAPHIC NOTES
 Front & rear exterior _____
 Hood, inner & outer panels _____
 Trunk area and Decklid, inner & outer panels _____
 Roof NO ROOF DAMAGE
 Door interior panels NO DAMAGE
 Left & right instrument panel & odometer NO DAMAGE
 Ashtray(s) area NO DAMAGE
 Left & right front seat and carpet NO DAMAGE EXCEPT FOR CARPET AT ACCELERATOR
 Underbody & exhaust (include hangers) NO DAMAGE
 Option code label _____
 Engine compartment SEE PHOTOS & PHOTOGRAPHIC NOTES
 Radiator, front & rear _____
 Coolant recovery bottle COOLANT LEVEL NORMAL
 Transmission cooler lines/connections OK
 Engine compartment engine coolant lines/bores, connections/clamps OK
 Engine compartment heater lines/bores, connections/clamps (include those to shuttle body) ONE HOSE BURNT NEAR LEFT COWL
 All fuel lines/bores, filter, connections/clamps FUEL FLEX HOSES BURNT
 TBI, injector rail, or carburetor & fuel line connection OK
 Engine compartment fuel lines/bores, connections & o-rings SEE PHOTOS & PHOTOGRAPHIC NOTES
 Power steering lines/bores, connections/clamps OK
 Chassis & structural wiring NO DAMAGE

***** TV - VEHICLE INSPECTION (Continued) *****

Battery & attached cables CABLES ATTACHED. SURE OF BOLT, NUTS, CABLE SEE PHOTO NOTE

Engine block (note precise location of cracks, holes, etc.) NO VISIBLE CRACKS

Engine oil pan DRY

Engine compartment hinge torque rods OK. NOT DAMAGED

Engine compartment exhaust system (e.g. intact, rusted, modified, out of position, clearance, etc.) NORMAL

Any item which is alleged to be the cause/source DEALER ALLEGES FUEL REGULATOR

Anything on vehicle which is after-market NO AFTER MARKET EQUIPMENT, NOTICED

Anything on vehicle which is a modification NO

Anything on vehicle which is unusual, or out-of-place, etc. NO

B. Enter observations/measurements for the following on the form and take color photographs as necessary.

For the following fluids, comment on the fluid level, smell (burned?), feel (gritty?), color (dark?), and apparent condition (normal, water, particles, etc.):

Engine coolant COOLANT JAR LEVEL NORMAL

Engine oil NORMAL LEVEL

Transmission fluid NOT CHECKED BUT NO FLUID LEAKS

Power steering fluid FULL

Brake fluid MASTER CYLINDER RESERVOIR MELTED

List all driver electrical controls which are in the "On" position (include ignition) NONE

Fuses (Identify all open or not proper size) SEE APPENDUM

Wiring insulation at fuse blocks WIRE INSULATION NEAR ALL FUSE BLOCKS NORMAL

Fusible links (Identify all open)

Spark plug wiring and boot condition FRONT WIRES BURNED

Fuel filler "Lead Free" reminder in place? (Y/N) Y Describe

Location of fuel filler cap (or evidence of remains) ON

Catalytic converter (any displacement or swelling?) NORMAL

Position of windows (if glass missing, do further inspection) ALL WINDOWS CLOSED

C. Photograph any damage to claimant's vehicle relating to the accident and comment on the nature and extent of damage and estimated cost to repair (attach copy of estimate, if available) NO ESTIMATE AVAILABLE

FOR DAMAGE SEE PHOTOGRAPHIC NOTES

**PRELIMINARY PAR INSPECTION
FIELD PHOTOGRAPHIC NOTES**

Division: CADILLAC

Ref# 990027207

Vin: 1G6KS52Y4VU841955

Claimant's Name (LAST FIRST): [REDACTED]

Inspected By: E. Seckel

Organization: Engineering Analysis Associates, Inc.

Phone: (561) 488 3760

Inspection Date: 07 / 30 / 99

Mileage at Inspection: UNKNOWN

Roll Number 1

PAGE 1 OF 2

Neg # Description:

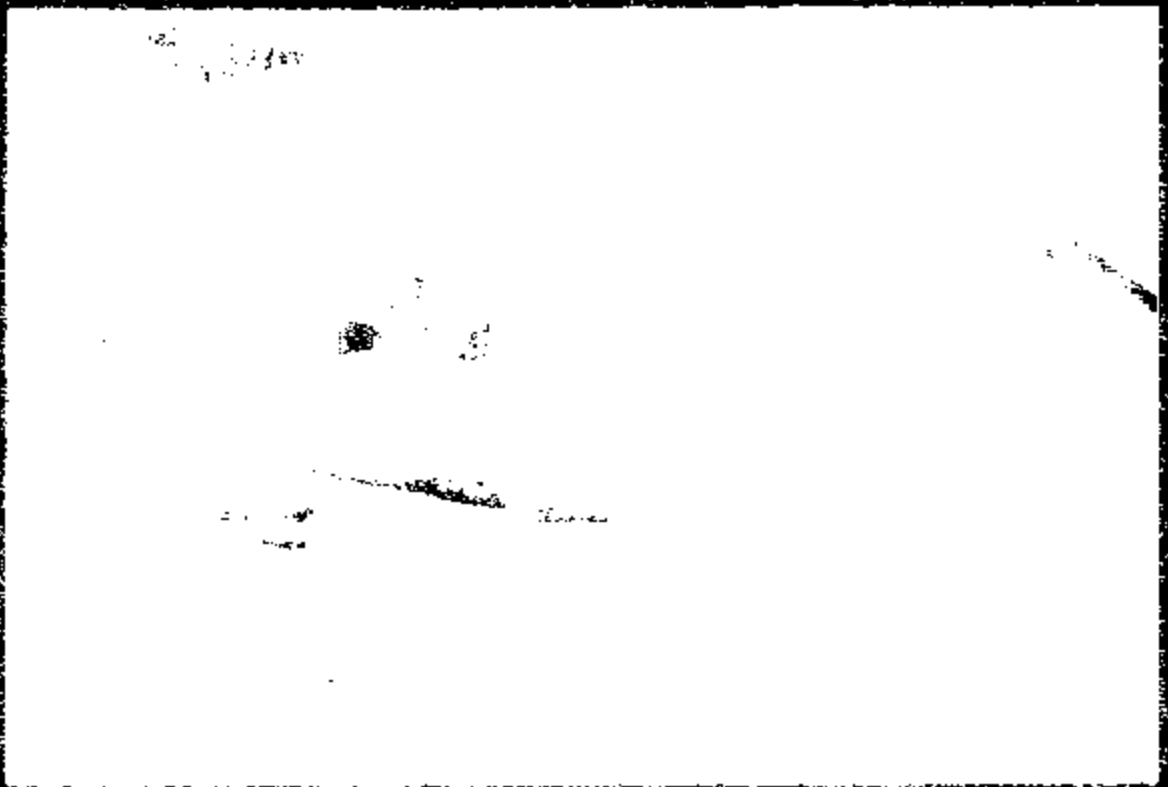
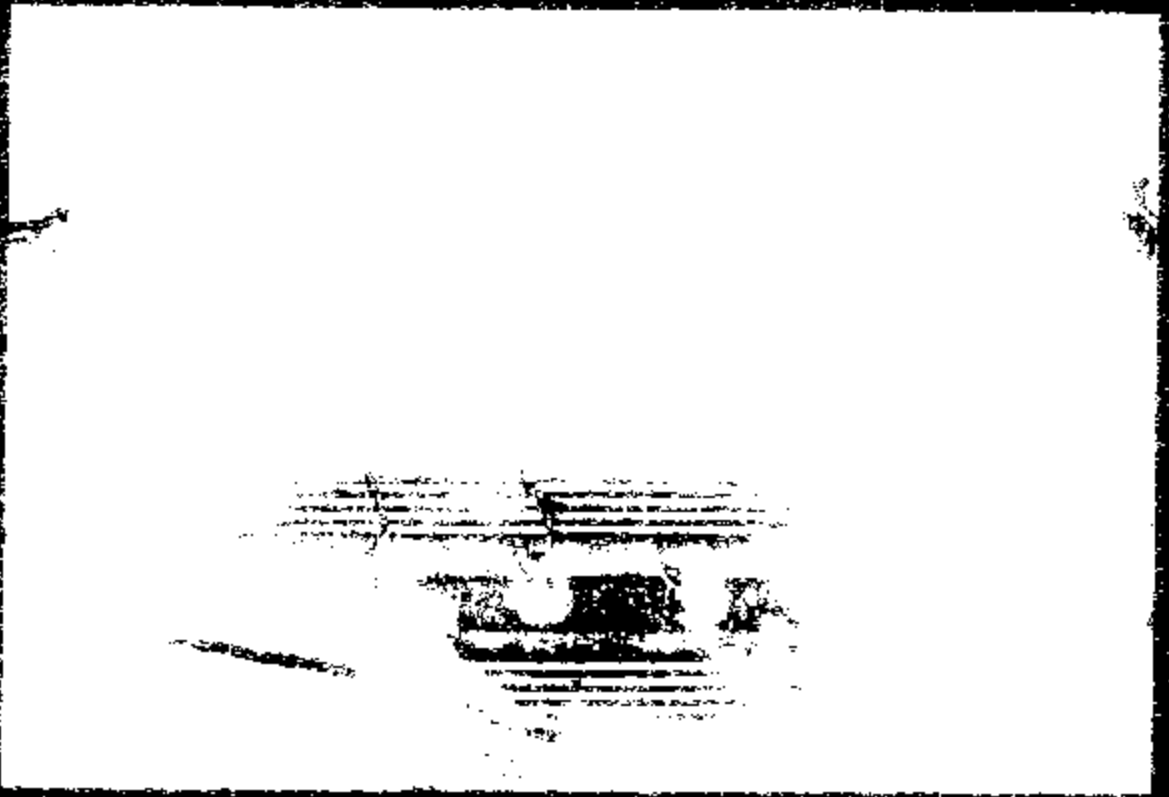
0. _____
1. FRONT VIEW WITH HOOD OPEN. INNER & OUTER PANEL HEAT DISTORTED IN RIGHT FRONT AREA
2. RIGHT FRONT CORNER. PAINT BURNT OFF TO BARE METAL. BOTH HOOD TORQUE RODS UNDAMAGED. NOTE R/F TIRE AND WHEEL DOES NOT BELONG TO THIS CAR. ORIGINAL TIRE AND WHEEL IS ON PHOTO # 9.
3. RIGHT SIDE OF CAR. NO PAINT DAMAGE TO DOORS & 1/4 PANEL. R/F DOOR HAS SMOKE DEPOSITS ON OUTER SURFACE. ALL DOOR GLASSES AND FRONT & REAR WINDSHIELDS UNDAMAGED.
4. RIGHT REAR CORNER. NO PAINT DAMAGE TO TRUNK LID OR 1/4 PANELS
5. REAR VIEW. ALSO NOTE PAINT DAMAGE TO R/F HOOD AREA.
6. LEFT SIDE OF CAR. NO PAINT DAMAGE TO BOTH LEFT DOORS. DARK AREA ARE SMOKE DEPOSITS ONLY
7. LEFT FRONT FENDER AREA. THE BLACK STREAK ON FENDER IS SHADOW REFLECTION OF TOW TRUCK CRANE. THERE IS NO HEAT DAMAGE TO PAINT
8. L/F CORNER
9. ORIGINAL BURNT TIRE & WHEEL WHICH WAS MOUNTED ON R/F
10. VIN PLATE ON DASH
11. L/F DOOR FRAME LABEL
12. FRONT VIEW CLOSE UP OF HOOD & BUMPER ASSEMBLY
13. FRONT VIEW OF UNDERSIDE OF HOOD. ALL HEAT DISTORTION IS CONFINED TO RIGHT FRONT CORNER OF HOOD. THE REMAINING SURFACE OF THE HOOD REINFORCEMENT IS ONLY SMOKE DAMAGED. THE HOOD LINER WAS MISSING.
14. INTERIOR OF CAR. VERY MINOR SMOKE DEPOSITS. NO DAMAGE TO INTERIOR TRIM OR SEATS AND CARPETING EXCEPT AREA NEAR ACCELERATOR PEDAL. SEE # 32
15. VIEW OF ENGINE COMPARTMENT AS SEEN FROM RIGHT FENDER OPENING. COOLANT RESERVOIR LEVEL NEARLY FULL, POWER STEERING FLUID LEVEL NORMAL. HOSES SLIGHTLY SCORCHED.
16. VIEW OF ENGINE FROM RADIATOR TOWARDS COWL.
17. L/R ENGINE COMPARTMENT WITH VIEW OF MELTED BRAKE MASTER CYLINDER FLUID RESERVOIR, PARTIALLY MELTED AIR CLEANER HOUSING, AND PARTIALLY MELTED FUSE PANEL. WIRING TO FUSE PANEL UNDAMAGED AT FUSE PANEL. ALSO SHOWS THROTTLE VALVE WHICH IS FREE TO MOVE IF ACTIVATED FROM CRANK.

18. REAR OF ENGINE NEAR LEFT COWL. THE HEAVY BARE WIRING IS FROM THE ACCELERATOR LINKAGE. THE MAIN WIRING HARNESS NEAR COWL AND COILS IS ONLY DAMAGED ON THE OUTER CONDUIT. THE INDIVIDUAL WIRES IN MAIN HARNESS ARE UNDAMAGED. SOME OF THE ENGINE CONTROL WIRING IS BARE OF INSULATION NEXT TO COWL.
19. CLOSE UP OF TOP LEFT REAR ENGINE TOP COVER AND BARE ENGINE CONTROL WIRING
20. CLOSE UP OF METAL FUEL LINES AND WIRING
21. CLOSE UP OF METAL FUEL LINES NEAR INJECTORS. BOTH FLEX FUEL LINES CONNECTING TO THE SOLID FUEL LINES AT THE COWL ARE DESTROYED BY THE THERMAL EVENT. NOTE FUEL LINE LOCKING CLIPS ARE STILL IN PLACE. SEE ARROWS
22. VIEW OF FUEL REGULATOR VALVE AFTER REMOVING CORNER OF PLASTIC TOP ENGINE COVER. WITH PARTIALLY MELTED FUEL EXHAUST LINE. SEE ARROW.
23. CLOSE UP OF FUEL REGULATOR VALVE WITH PROPERLY INSTALLED RETAINER CLIP WHICH RETAINS VALVE TO INJECTOR AND FUEL RAIL ASSEMBLY. ALSO REFER TO ATTACHED PARTS BOOK COPY.
24. CLOSE UP OF REMOVED FUEL REGULATOR VALVE WITH "O" RING, FILTER SCREEN AND RETAINER WHICH HAS BEEN DAMAGED AND DISTORTED ON REMOVAL. ALSO SHOWN IS PARTIALLY MELTED FUEL EXHAUST PIPE. THERE WAS NO OTHER DAMAGE TO THE VALVE BODY ASSEMBLY.
25. SAME AS # 24
26. CLOSE UP OF FUEL INJECTOR. THERE IS NO DAMAGE TO THE INJECTOR TOP & "O" RING WHICH SEALS INJECTOR AND FUEL REGULATOR VALVE NOR TO THE WIRE TERMINAL OF THE INJECTOR BODY.
27. MAIN CROSS WIRING HARNESS ALONG FRONT CROSS MEMBER. THE HEAVY POSITIVE BATTERY WIRE IS PARTIALLY CUT WITH MELTED & BEADED WIRE ENDS. SEE PEN POINTING TO CUT AND MELTED WIRE ENDS. IT IS UNKNOWN WHAT CAUSED THIS CONDITION AT THIS AREA
28. CLOSE UP OF RIGHT FRONT CHASSIS CORNER. NOTE THIS IS NOT THE ORIGINAL TIRE WHICH BURNT UP SEE # 9
29. CLOSE UP OF R/F HEADLIGHT AREA.
30. CLOSE UP OF FUSE PANELS ON INSIDE OF L/F FENDER. WIRING AT PANELS IN UNDAMAGED.
31. VIEW OF AREA UNDER BRAKE MASTER CYLINDER.
32. INTERIOR OF PASSENGER COMPARTMENT NEAR ACCELERATOR PEDAL. THE HEAT DESTROYED THE COWL NEAR BLOWER MOTOR HOUSING & PENETRATED INTO PASSENGER COMPARTMENT.
33. SAME AS # 32
34. WIRING NEAR ENGINE ELECTRONIC CONTROL UNIT. OUTER WIRING HARNESS IS PARTIALLY DESTROYED.

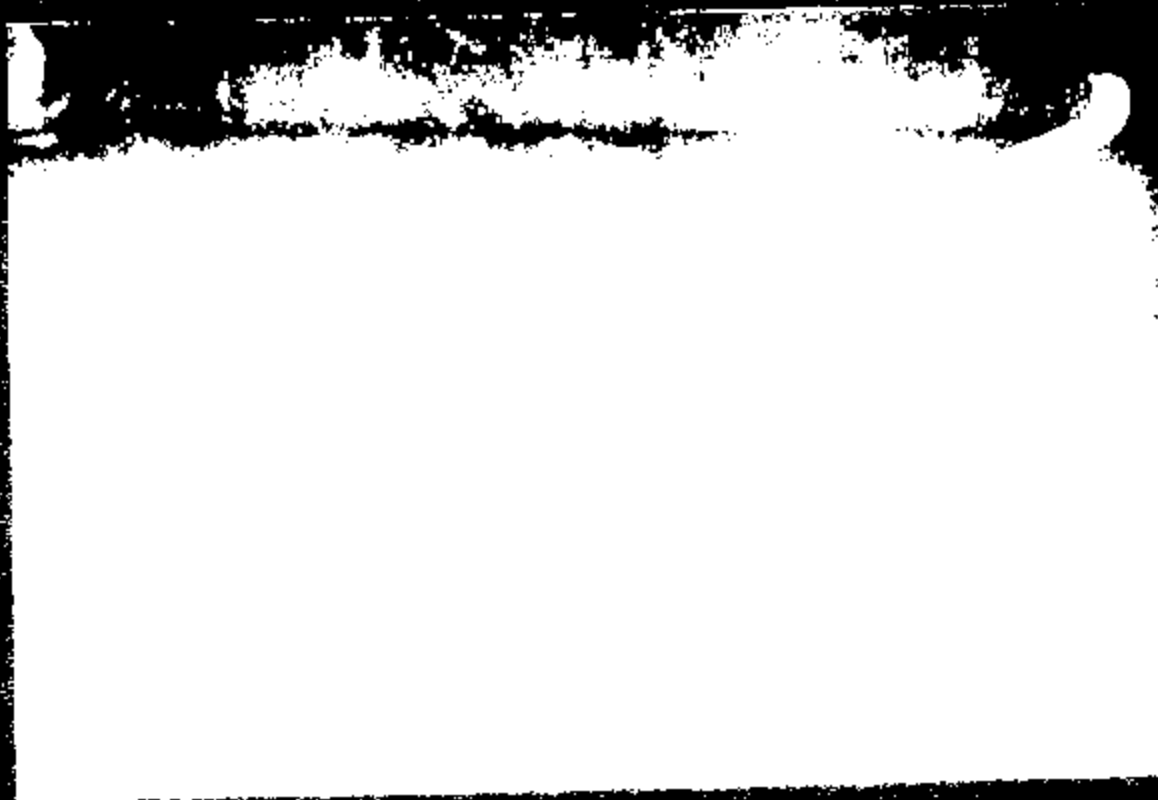
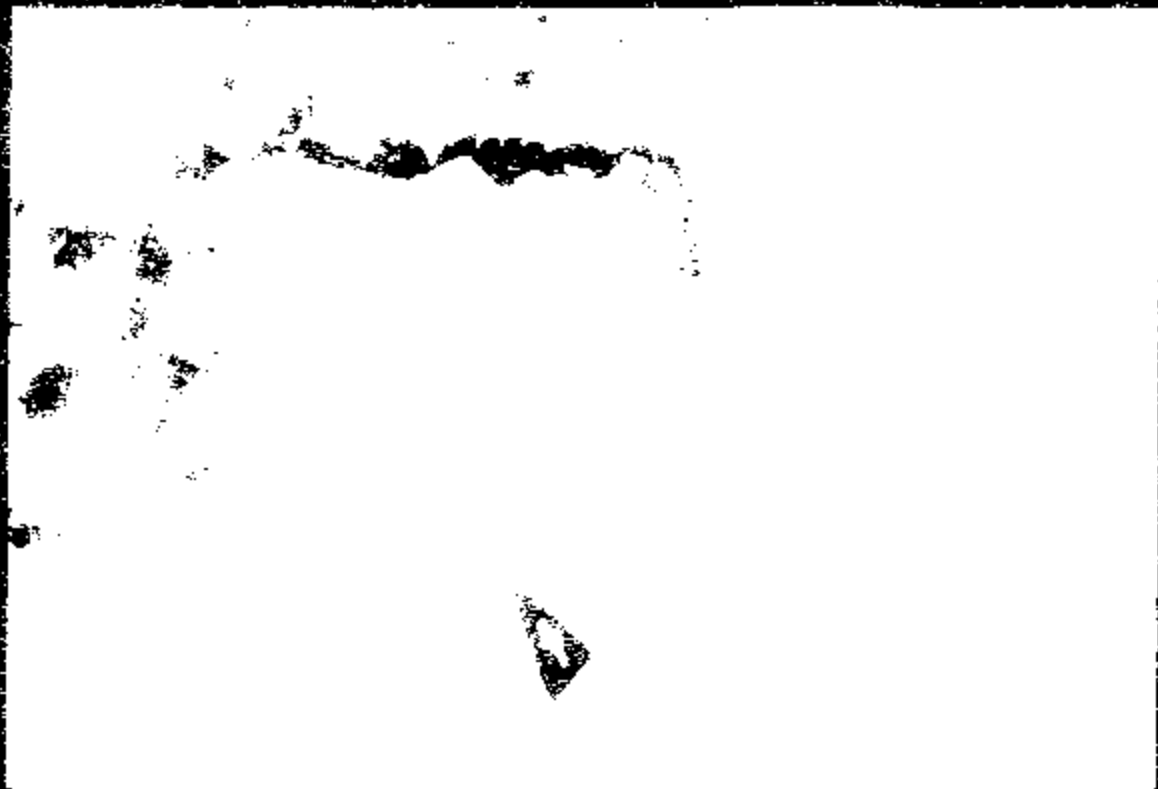




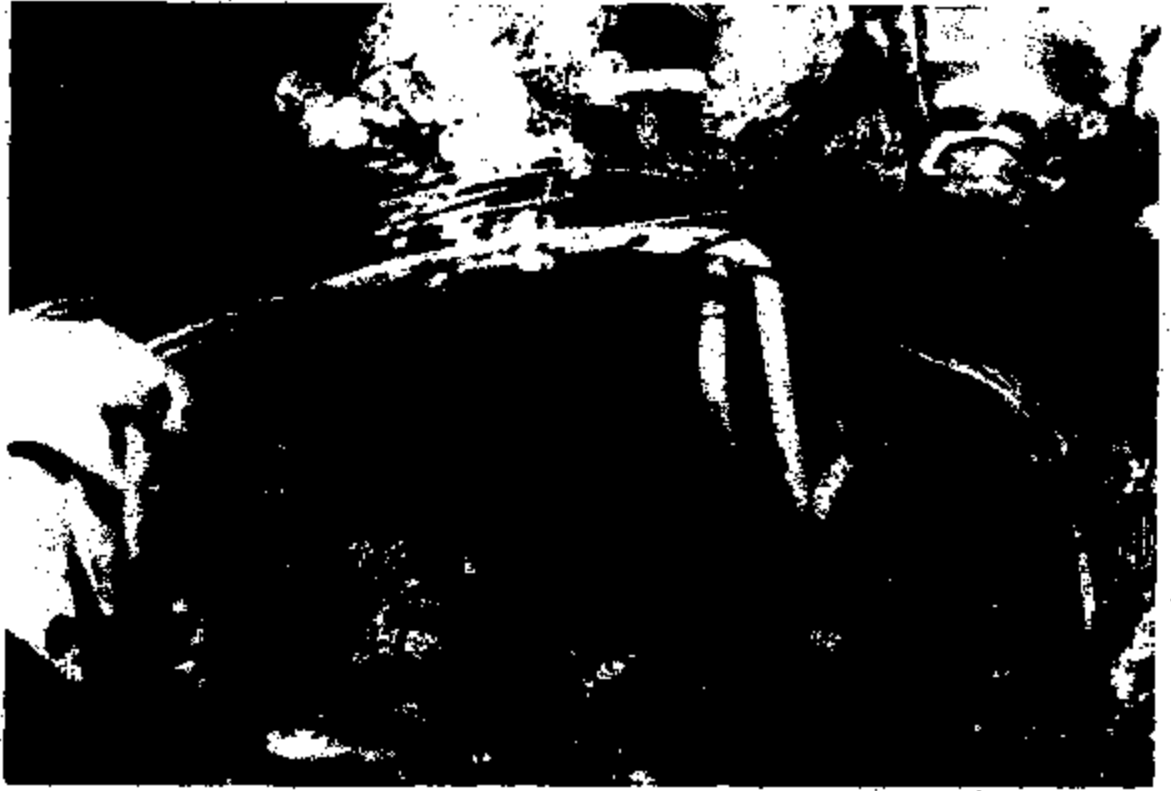














1044802Y4VU41755		97/CADILLAC/NEUTRA/CL/HR/LS/GR		119445	
[REDACTED]		E BETGE/NEUTRA 08/02/97		08/28/99	
MIAMI, FL		[REDACTED]		655	
[REDACTED]		[REDACTED]		5494	
[REDACTED]		[REDACTED]		23146	
07x33an 04/28/99 08:00am 5		STATE REGN IN09442		[REDACTED]	
[REDACTED]		[REDACTED]		[REDACTED]	



WILLIAMSON
Cadillac
Creating A Higher Standard.

7230 North Kendall Drive, Miami, Florida 33156-7805
Telephone: (305) 678-7100



REG NO. MV-08462

MVN-04101407

ORIGINAL CUSTOMER ESTIMATE: TOTAL

129
GENERAL SHOP
CAR WOULD NOT START IN MORNING
Start fuel and the
-5 No.110 which also replaced belt
Batt code 6PSRE-SD

129
BE
BATTLE IN R/F ENG. AREA,
WREN IN TALE.
N.T.F. see guide

129
TRIN
CHTR ENCL AND TRAY WILL NOT STAY CLOSED
SEE B/ORDER.....

0.3 C2770
you cannot arbitray

WAIT
[Signature]

ORDER NUMBER	DATE	TIME
1		
REPAIR AUTHORIZED	APPROVED BY	
1		
REPAIR ALLOCATION	APPROVED BY	
2		
NAME AND PHONE NUMBER OF CLIENT FOR WHOM THIS ESTIMATE WAS PREPARED		
NAME AND PHONE NUMBER OF CLIENT FOR WHOM THIS ESTIMATE WAS PREPARED		
A SMALL SURCHARGE REPRESENTING COSTS AND PROFITS TO THE MOTOR VEHICLE FACILITY FOR FEES SUCH AS MISCELLANEOUS SHOP SUPPLIES MAY APPLY.		

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$100.00.

- I REQUEST A WRITTEN ESTIMATE.
- I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$100.00. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
- I DO NOT REQUEST A WRITTEN ESTIMATE.

I hereby authorize the repair work described and listed in this estimate along with the necessary material and agree that you are not responsible for loss or damage to vehicle or vehicle left in vehicle in event of fire, theft, or any other cause beyond your control or for any damage caused by manufacturing or parts or delays in parts shipments by the supplier or transporter. I hereby grant you neither your employees nor subcontractors to operate the vehicle herein described in street, highway or elsewhere for the purpose of testing similar equipment. An express customer's lien is hereby acknowledged on above vehicle in respect to amount of repairs thereto, and my reasonable attorney's fees.

CUSTOMER'S SIGNATURE X

WILLIAMSON CADILLAC SERVICE INFORMATION REPAIRS

VIN: 1G6K952400011750		YEAR/MAKE/MODEL: 77/CADILLAC/DEVILLE		PLANT: MS	STOCK NO: 71463
CUSTOMER NO: 111017		DATE OF WORK: 02/12/97	TIME: 15	TECHNICIAN: 515	DATE: 02/25/97
ADDRESS: MIAMI, FL		POLICY NO.	PLATE NO.	INSURANCE CO.	PHONE NO. 7926
STATE REG NO: 1V09462		INSURANCE AMOUNT	APPROVED TO THE POINT / UNIT PRICE	INSURANCE CO.	PHONE NO. 3400
REG NO: 09403		WILLIAMSON Cadillac Creating A Higher Standard.		REG NO: 0910107	
DATE: 09/23/97		7250 North Kendall Drive, Miami, Florida 33154-7805		TELEPHONE: (305) 679-7100	
TIME: 10:00		Telephone: (305) 679-7100		TELEPHONE: (305) 679-7100	

GENERAL CUSTOMER ESTIMATE TOTAL

WAITER

COMMENTS: **WAITING AT SHOWROOM.**

NO. WORKER: **417** TRIM COST. STATES LEFT SIDE SUNSHIELD WIPER DOES TO FAIL.

10364) O.C.

- Windshield wiper transmission
- New wiper transmission

Arr

ESTIMATE NO.	DATE
APPROVAL	APPROVED BY
FOR SERVICE	APPROVED BY
A SMALL SURCHARGE REPRESENTING COSTS NOT RELATED TO THE MOTOR VEHICLE FACILITY FOR ITEMS SUCH AS MISCELLANEOUS SUPPLIES MAY APPLY.	
PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$99.00.	
<input type="checkbox"/> I REQUEST A WRITTEN ESTIMATE. <input type="checkbox"/> I DO NOT REQUEST A WRITTEN ESTIMATE, AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$99.00.	
THIS AMOUNT IS APPROVAL. <input type="checkbox"/> I DO NOT REQUEST A WRITTEN ESTIMATE.	
I hereby authorize the necessary material and vehicle or vehicle bill by your control or for any shipment by the employee provided. Signature or stamp mechanic's fee to be of repair service.	
CHECKED BY: <i>[Signature]</i> SIGNATURE: <i>[Signature]</i>	

MAKE: FL 305-666-5091 12184pm 11/07/97 STATE REG: HV09467		77/CADILLAC/DEVILLE SL5/4DR GLS STD 11/87 66'156/NEU118 09/12/97 15 9700 4510		75496 11/07/97 427 9700 4510	
WILLIAMSON <i>Cadillac</i> Creating A Higher Standard.		7250 North Kendall Drive, Miami, Florida 33156-7005 Telephone: (305) 678-7100		REG. NO. MV-08462 MMS-04181487	

ORIGINAL CUSTOMER ESTIMATE TOTAL

Wait

N 003CZ01
 195 TRIM
 TRUNK WILL NOT OPEN FROM CONSOLE
Terminal pulled out diagnose problem w/o terminal

N 003CZ02
 195 TRIM
 FUEL DOOR WILL NOT OPEN FROM CONSOLE
Single plug diagnose for PSC estimate + repair not to be

N 003CZ04
 195 TRIM
 CAN NOT READ INFORMATION DISPLAY... WILL NOT CHANGE WITH BUTTON
Tested + wait all functions

GENERAL ESTIMATE	0	ADJ. REPAIR AUTHORIZED BY	
ADDITIONAL APPROVED AMOUNT	0	ADDITIONAL ESTIMATE BY	
REPAIR APPROVED ESTIMATE	0	WRITE THE PHONE NUMBER OF YOUR PLACE AND THE APPROVED AMT. NUMBER	
CUSTOMER FOR MESSAGE	0	REMARKS OF ADJ. VEHICLE APPROVED	

A SMALL SURCHARGE REPRESENTING COSTS AND PROFITS TO THE MOTOR VEHICLE FACILITY FOR ITEMS SUCH AS MISCELLANEOUS SHOP SUPPLIES MAY APPLY.

PLEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$200.00.

I REQUEST A WRITTEN ESTIMATE.

I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$_____ THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.

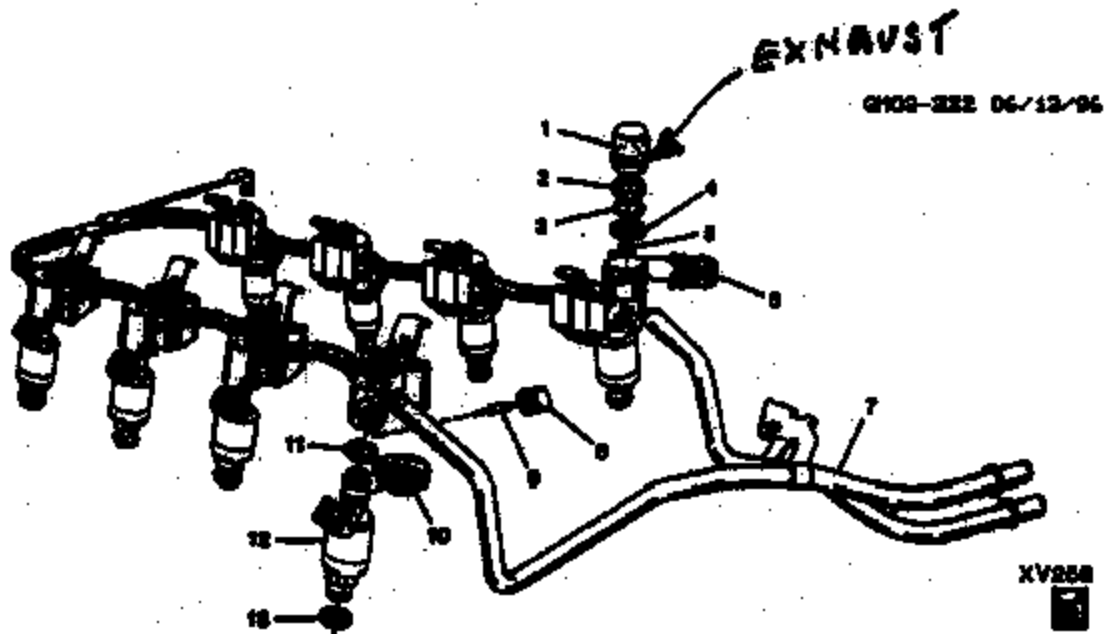
I DO NOT REQUEST A WRITTEN ESTIMATE.

AN SCREW LOOSE - CROSS THREAD IN BE!
 Missing NO TIME

I hereby authorize the repair work hereunder not just to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles in vehicle in case of fire, theft, or any other cause beyond your control or for any delays caused by unavailability of parts or change in parts supplied by the supplier or transporter. I hereby grant you and/or your employees permission to operate the vehicle herein described in streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repair costs, and any mechanic's lienor's fee.

CUSTOMER SIGNATURE: *Larry Beard*

Make: CADILLAC, Year: 97, Model: Seville/Concours/Deville/Hearse



- ① FUEL REGULATOR WITH
FUEL EXHAUST SEE
ARROW
- ⑥ RETAINER CLIP

Copyright General Motors Corporation. All rights reserved.
Williamson Cadillac Parts Department phone# 670-7276 fax# 670-7393****
Albert, Bob, Brian, David, Kiki, Larry, Manny, Mike ***Thanks for calling***

GM Vehicle Inquiry System Summary

[Home](#) - [Summary](#) - [Claim History](#) - [Vehicle Build](#) - [Delivery Information](#) - [Dealer Information](#) - [Service Contract](#) - [Warranty Block](#) - [Branded Title](#)

[Help](#)

VIN:	1G6KS52Y4VU841955
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VEHICLE INFORMATION

Merchandising Model:	6KS69 - 1997 SEVILLE SLS	Warranty Start Date:	08/02/1997
Delivering Dealer:	WILLIAMSON CADILLAC COMPANY 7250 NORTH KENDALL DRIVE MIAMI, FL 33156-7886 (305) 670-7100	Selling Source:	12 - CADILLAC
		Site Code:	21029
		Business Associate Code:	119048
Service Contract:	No	Branded Title:	Yes
		Warranty Block:	Yes
		PDI Status:	Paid

CAMPAIGN ELIGIBILITY

Vehicle Has No Current Record Of Outstanding Campaigns.

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
48/50 BUMPER TO BUMPER - NO DEDUCTIBLE	08/02/1997	15 miles	8/2/2001	50015 miles
72/100 SHEET METAL RUST-THROUGH	08/02/1997	15 miles	8/2/2003	100015 miles
48/50 CORROSION	08/02/1997	15 miles	8/2/2001	50015 miles

CLAIM HISTORY

R.O. Date	R.O. Number	Type	Labor Operation	Odometer Reading
07/23/1999	126658	#	J5560 - DFI REGULATOR RPL	25142 miles
07/23/1999	126658	#	L2160 - FT EXHAUST PIPE RPL	25142 miles
04/28/1999	119444	#	N0110 - BATTERY REPLACE ONE	23146 miles
04/28/1999	119444	#	C2770 - ASH TRAY CONSOLE RP	23146 miles
11/07/1997	075496	#	N6360 - INSTRUMENT PANEL RP	4510 miles
11/07/1997	075496	#	N9995 - CUST COMPLAINT NOT DUPLICATED	4510 miles
11/07/1997	075496	#	R4060 - ACT MOT LOC R&R/RPL	4510 miles
09/25/1997	071463	#	N3647 - W/S WPR TRANS RPL	3430 miles
09/09/1997	069093	#	J8667 - SERPENTINE BELT RPL	1153 miles
08/22/1997	068577	#	N1410 - RT BACKUP LAMP RPL	609 miles
07/21/1997	A41955	I	Z7000 - NEW VEHICLE INSPECTION ALLOWANCE	0 miles

1997 SEVILLE SLS
 570 SHALE BEIGE /VBS
 154 NEUTRAL SHALE LEATHER
 ORDER NO. I970CV/ STOCK NO.
 VIN 1G6KS52Y4V0841955

CADILLAC MOTOR CAR DIVISION
 GENERAL MOTORS CORPORATION
 30009 VAN DYKE
 WARREN MI 48093-2350
 VEHICLE INVOICE 6AD06305472

MODEL & FACTORY OPTIONS	MSRP	INV AMT	RETAIL - STOCK
K269 SEVILLE SLS	39995.00	36750.43	INVOICE 07/21/97
F29 FEDERAL EMISSIONS	N/C	N/C	SHIPPED 06/10/97
L28 4.6 L V8 DOHC NORTHSTAR ENGINE	0.00	0.00	EXP I/T 06/17/97
M20 AUTO TRANSMISSION W/ OVERDRIVE	0.00	0.00	INT COM 07/23/97
VK3 LICENSE PLT FRT MOUNT PROVISION	N/C	N/C	PRC EFF 06/10/97
WA7 MEMORY / PERSONALIZATION PKG.	437.00	371.45	KEYS SECURED
WA9 LEATHER/LUMBAR PACKAGE	1223.00	1039.55	WFP-F QTR OPT-1
154 NEUTRAL SHALE LEATHER	0.00	0.00	BANK: GNAC - 238
570 SHALE BEIGE	0.00	0.00	CHG-TO 21-029

SHIP WT: 3815
 HP: 42.9
 DAN: 03009
 MEMO 2082.75

TOTAL MODEL & OPTIONS	41655.00	38161.43	ACT 231	37576.78
DESTINATION CHARGE	665.00	665.00	B/B 261	1249.55
DEALER ADVERTISING		208.28	ADV 65A	208.28

TOTAL	42320.00	39034.71	FAY 310	39034.71
MEMO: TOTAL LESS HOLDBACK AND APPROX WHOLESALE FINANCE CREDIT		37185.13		

 INVOICE DOES NOT REFLECT DEALER'S ULTIMATE COST BECAUSE OF MANUFACTURER REBATES, ALLOWANCES, INCENTIVES, HOLDBACK, FINANCE CREDIT AND RETURN TO DEALER OF ADVERTISING MONIES, ALL OF WHICH MAY APPLY TO VEHICLE.

THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GNAC.

WILLIAMSON CADILLAC COMPANY

REMIT TO GNAC NO. 238
 VIN 1G6KS52Y4V0841955
 \$ 39034.71 INV 6AD06305472
 DUE 07/23/97 DEALER 21-029

GM WARRANTY HISTORY INQUIRY

(UPDATED THRU 20000314)

VEHICLE-ID-NUMBER DESCRIPTION COM DEL-DLR DEL-DATE DEL-COM PD1-ELIG CLM
 186K952Y4V8A1955 SEVILLE SL8 N 1221029 19970002 15 PAID 12

PROD-DTE: 19970610 DELMNR-DATE: WMBLK-DTE: 19990901
 INV-DTE: 19970721 DELMNR-COM: WMBLK-TYP: SV
 INV-DLR: 1221029 SHIP-TO-DLR: 1221029

C	T	NO.	RODATE	RO-NO.	DOC-NO	LN	LRDP	LN-TOTAL	ODOMETER	AUTO	AUTO
ID	NO.	NO.	NO.	NO.	NO.	NO.	NO.	NO.	NO.	ID	CODE
001	*	004	19990901	STALV	800000	00	0000	0.00		0	
LABOR DESCRIPTION NOT FOUND											
002		1221029	981	09990723	126658	200077	02	12160	144.86	25142	
PIPE, FRT EXH MUFF TO CAT CONV-RPL FAIL-PART:03344326 PIPE											
003		1221029	981	19990723	126658	200078	01	15560	69.76	25142	
REGULATOR/BANDGETS, FUEL PRES-REPLACE FAIL-PART:17113346 REGULATOR											
		1221029	935	19990428	119444	119124	02	02770	87.29	23146	
ASH TRAY, FRT-CONSOLE-REPLACE FAIL-PART:25449709 ASHTRAY											
005		1221029	955	19990428	119444	119125	01	00110	142.49	23146	
BATTERY, ONE-REPLACE FAIL-PART:19001631 BATTERY											
006		1221029	804	19971107	075496	323106	01	09995	12.42	4510	0090 B
CUSTOMER CONCERN NOT DUPLICATED											
007		1221029	883	19971107	075496	318151	03	04060	37.25	4510	
ACTUATOR MOTOR, FUEL DR LK-NRA/REPL											
008		1221029	885	19971107	075496	318153	01	02360	24.83	4510	
WIRE/CONN, INST PANEL-REPAIR											
009		1221029	760	19970925	071463	278178	01	03647	37.25	3430	
TRANSMISSION ASM, BOTH W/S WPK-REPL											
010		1221029	737	19970909	089993	254087	01	00667	59.11	1153	
BELT, SERPENTINE DRIVE-REPLACE FAIL-PART:04000825 NOT FOUND											
011		1221029	738	19970822	088577	259003	01	01410	171.22	609	
LAMP ASM, R-BACK-UP-REPLACE FAIL-PART:16523420 LAMP ASM,											
012	I	1221029	730	19970721	041955	041955	01	27000	99.33	0	
PASSENGER CAR AND TRUCK NVI											

NO MORE CLAIMS FOR THIS VIN

RD-TYPE: 070 SERV-TYPE: 000 DEL-TYPE: 010
 RD DESCRIPTION RPD DESCRIPTION

K BODY
 4 DOOR
 CADILLAC
 LB0 4.6 LITRE V8 MPI
 MD0 AUTO TRANS W/OVERDRIVE
 MH1 F-4 AUTO TRANS
 ACS INFLAT RESTRAINT DR/PAB
 CJ2 AIR CONDITIONING
 TILT STEERING COLLIM
 UFS POWER ANTENNA
 PONEK WINDOW

35 SERIES NO MODEL
 SEDAN
 V8 ENGINE
 U.S. FEDERAL EMISSIONS
 AUTO TRANS
 UT9 INSTRUMENT CLUSTER
 ANTELOCK BRAKE
 POWER STEERING
 000 DR/PAB NEPOTE ELEC
 UTL RADIO AM/FM CAS8
 YK3 LICENSE PLATE BRKT

END OF OPTIONS

VINCAMPI

DISPLAY VIN\RELATED CAMPAIGNS

KIPSA061
03/16/2000 16:19

VIN 1G6KS52Y4VU841955

OPEN\CLOSED STATUS:

SEL	CAMPAIGN STATUS	REPAIR	REPAIR PREV.	CAMPAIGN
CODE	NUMBER	DATE	DEALER NUMBER	TYPE

NO CAMPAIGNS CURRENTLY AFFECTING THIS VEHICLE

PF 10	MANT	11	VHCP	12	DLRA	13	ADDT	14	XREF	15	DESC	16	ADST	17	NADR	18	DELT	PW:	
19	PERF	20		21		22		23		24								PF SELECT:	GOTO:

State Farm Insurance Companies



State Farm Insurance Companies
18068 SW 122 Avenue
Miami, FL 33186

800-252-6700
800-252-6752 (fax)

January 19, 2000

NO OMIAS
NO UP

RECEIVED

JAN 23 2000

*Call
1/26/00*

ESIS
300 Renaissance Center
Mail Code 482-C20-D71
Detroit, Michigan 48265-3000

ESIS-GM CLAIMS UNIT

RE: Claim Number : [REDACTED]
Date of Loss : July 23, 1999
Our Insured : [REDACTED]
Your Reference: [REDACTED]

Dear To Whom it may concern:

Please be informed that we are waiting for status on or subrogation on your file # [REDACTED] Please communicate with us in regards to your position in this matter.

Sincerely,

Javier Arana
Claim Representative
(305) 252-6751

State Farm Mutual Automobile Insurance Company

January 27, 2000

Javier Areas
State Farm Insurance
15055 SW 122 Ave
Miami FL 33186

308 Renaissance Center
Mail Code 482 C20 D71
DETROIT, MI 48265-3000
Telephone 800-888-0164
Facsimile 313-665-0911

Your File Number: [REDACTED]
Claimant: [REDACTED]
Our File Number: [REDACTED]
Our Client: General Motors Corporation
Date of Event: 7/23/99

Dear Mr. Areas:

This will acknowledge your claim on the above-referenced matter. In order to evaluate your claim, the following documents and information are respectfully requested:

1. A copy of your expert report which states your theory of liability. Also include the original or laser color copies of the photographs taken by your expert.
2. A copy of the police and/or fire report.
3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.
4. Advise if the vehicle owner and/or operator note anything wrong or unusual about the vehicle prior to the incident.
5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If repairs and maintenance were performed by the vehicle owner, then a chronological summary of operations performed is needed.
6. Advise as to any after-market equipment which may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.
8. Did the vehicle owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.
9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.
10. Provide copies of your proof of payment.
11. The present location of the subject vehicle and its availability for inspection.
12. Provide proofs of the transmission and engine oil levels, if applicable.

Upon receipt of the above-requested information and documentation, this matter will be assigned a claim number and further review of this matter will be complete. **During this entire process, the subject vehicle should remain available for inspection, if necessary.**

If you have any questions, please feel free to contact me at 1.800.888.0164.

Sincerely,

Greg Thrasher
Property Damage Unit

/hmc

State Farm Insurance Companies



State Farm Insurance Companies
15055 SW 122 Avenue
Miami, FL 33185

305-252-8700
305-252-8752 (fax)

March 7, 2000 SECOND REQUEST

ESIS

Attn: Greg Thrasher
300 Renaissance Center/Mail Code 482 C20 D71
Detroit, MI 48265-3000

ESIS -
MAR 08 2000

404906

RE: Claim Number : [REDACTED]
Date of Loss : [REDACTED]
Our Insured : [REDACTED]
Your Reference: General Motors Corporations/ PD-01272000.

Dear Mr Thrasher:

Enclosed you will find the documents and information that you requested for your evaluation. Our investigation establishes that your insured was responsible for the damage to our policyholder's vehicle as a result of the repairs/maintenance.

Enclosed you will also find a copy of the service invoice from Williamson Cadillac dated 7/23/99. In addition, there was a report done by an inspector, same was mailed to General Motors, his name is Henry Seckle 561-883-9444.

Please communicate with us in regards to your position in this matter.

Sincerely,

Javier Areas
Claim Representative
(305) 252-6751

State Farm Mutual Automobile Insurance Company

STATE FARM INSURANCE
 15055 S.W. 122ND AVE
 MIAMI, FL 33186
 (305) 252-6700

Prop/ SA

Use id: 20005 Valuation - Request: 24274673 07/29/1999 12:13 *INSTANT*

Adjuster name: OTHER OTHER Loss date: 07/23/1999
 Adjuster id: J. ALLEN VIN: 1G6NS52Y4VU841955
 Claim reference: 59-V245-088 C REEF
 Insured: [REDACTED] Owner: [REDACTED]

----- VINGUARD -----		-----
Insurer Description		VINGUARD Analysis
Year	1997	1997
Make	CADILLAC	CADILLAC
Model	SEVILLE SLS	SEVILLE
	K85	K85
Body style	4D SED	4D SED
Engine	8-4.6L-FI	8-4.6L-FI
Trans	AUTOMATIC TRANSMISSION OVERDRIVE	
Restraints	AIR BAGS (DRIVER+PASS.)	AIR BAGS (DRIVER+PASS.)
Odometer	25,000	
This vehicle was assembled in		HAMTRAMCK, MI

VINGUARD message(s):
 VINGUARD has decoded this VIN without any errors.

 * WARNING - VINGUARD has detected prior event(s) in this vehicle's history. *
 * Please review the information detailed below. *

Collision History Information:
 Collision incident reported by State Farm Insurance
 on 07/29/1999 Claim # [REDACTED] in Miami, FL
 Repair estimate: \$22,639 Miles: UNKNOWN Damage Location: Total Loss

Vehicle Title Information:
 This vehicle was reported with an ODOMETER READING from the Department
 of Motor Vehicles of: 00,015 in Miami, FL on 08/02/1997.

----- Vehicle Valuation Summary -----		
DESCRIPTION	OPTION	LOCAL MARKET VALUE
Base value **		\$ 28,400.00
Odometer 25,000		+ 1,995.00
Vehicle equipment:		
STD	AT - AUTOMATIC TRANSMISSION	INCLUDED
STD	OD - OVERDRIVE	INCLUDED

----- Vehicle Valuation Summary (continued) -----

STD	TX - TRACTION CONTROL	INCLUDED
STD	SP - POWER DRIVER SEAT	INCLUDED
STD	PC - POWER PASSENGER SEAT	INCLUDED
STD	BS - BUCKET SEATS	INCLUDED
STD	RL - RECLINING/LOUNGE SEATS	INCLUDED
	LS - LEATHER SEATS	+ 400.00
STD	PS - POWER STEERING	INCLUDED
STD	TW - TILT WHEEL	INCLUDED
STD	PB - POWER BRAKES	INCLUDED
STD	DB - 4-WHEEL DISC BRAKES	INCLUDED
STD	AB - ANTI-LOCK BRAKES (4)	INCLUDED
STD	TG - TINTED GLASS	INCLUDED
STD	RD - REAR DEFOGGER	INCLUDED
STD	PW - POWER WINDOWS	INCLUDED
STD	IW - INTERMITTENT WIPERS	INCLUDED
STD	AW - ALUMINUM WHEELS	INCLUDED
STD	AM - AM RADIO	INCLUDED
STD	FM - FM RADIO	INCLUDED
STD	ST - STEREO	INCLUDED
STD	CA - CASSETTE	INCLUDED
STD	PA - POWER ANTENNA	INCLUDED
STD	PL - POWER LOCKS	INCLUDED
STD	PT - POWER TRUNK	INCLUDED
STD	AC - AIR CONDITIONING	INCLUDED
STD	EI - ELECTRONIC INSTRUMENTATION	INCLUDED
STD	CC - CRUISE CONTROL	INCLUDED
STD	AG - AIR BAG	INCLUDED
STD	RG - PASSENGER AIRBAG	INCLUDED
STD	CN - CONSOLE/STORAGE	INCLUDED
STD	PM - POWER MIRRORS	INCLUDED
STD	TD - THEFT DETERRENT/ALARM	INCLUDED
STD	AL - AUTO LEVEL	INCLUDED
STD	DM - DUAL MIRRORS	INCLUDED
STD	KE - KEYLESS ENTRY	INCLUDED

CCC Valuation Amount	\$ 30,795.00
Condition adjustment amount	+ 793.00
Actual Cash Value	<u>\$ 31,588.00</u>
Pre-tax amount	<u>\$ 31,588.00</u>
Adjusted vehicle valuation amount	<u>\$ 31,588.00</u>

** The base value is the local market value of a vehicle of the same year, make, and model as the loss vehicle, including average mileage, and all standard (STD) and predominant (PREDOM) options. As such, the vehicle equipment listing reflects proper deductions for all standard or predominant option(s) which are not present on the loss vehicle.



Chase Strateline Automotive Finance Corporation
Chase Automotive Finance
P.O. Box 31167
Tampa, FL 33631-3167

August 5th, 1999

State Farm

RE: Claim [REDACTED]

PH: 305 252-6707

Fax: 305 252-6752

Re: [REDACTED]

1997 Cadillac

VIN#: 1G6KE5RY4VU841938

CAF#: 27299017010063

To Marine:

Please consider this letter as a guarantee of this release on the aforementioned vehicle, upon receipt of your check in the amount of \$5,365.54. It is our understanding that this offer has been negotiated and agreed to by our customer(s). Our acceptance of your offer in no way supersedes the customer(s) acceptance.

Please send funds to:

Chase Auto Finance
4815 Independence Pkwy
Tampa, FL 33634
Attn: Elton McIntosh
PH: 888 225-3043

Sincerely,

Elton McIntosh
Collection Team Leader

RUZ000F4
AUTO - Recovery Check Listing
State Farm Insurance Companies
Coral Reef, FLORIDA
October 6, 1999

OFFICE CODE: 114
MACHINE NO : 53

24

Deposit number: T114279A01
Deposit total: \$3,624.69

Recoveries entered by: Centaure, Irene, (305) 252-6766
Subtotal: \$3,574.69

Line	Check Number	Check Amount	Claim Number	Claim Amount
1		638.75		638.75
2		2,517.19		2,517.19
3		418.75		418.75

#5011E 09PD #P10021503 #5820E011#

Salvage

Comprehensive Description	Amount	Rate	Policy
COMPREHENSIVE - PUT, CAC, OR LOW	7,970.74	311	2

DATE 8/11/1988
 AMOUNT \$27,970.74
 TAX

ENTERED BY **ASILLE, SONIA**
 AUTHORIZED BY **MARTINEZ, JOSEFINA**
 PHONE **(305) 278-0888**

REFERENCE

 **STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY** **1 19 600137 J**
 FLORIDA OFFICE: WESTERHAYEK, FL; ORLANDO, FL
 SUNPLANT BK CENTRAL FL, NA 62-215/431
 8/11/1988

ISSUED: [REDACTED] CLAIM NO: [REDACTED] LOSS DATE 7/23/1988

EXACTLY THIRTY-SEVEN THOUSAND NINE HUNDRED SEVENTY AND 74/100 DOLLARS

Pay to the Order of: [REDACTED]
 SOUTH MIAMI FL [REDACTED]

APPROVED BY

ISSUED: [REDACTED] POLICY NO: [REDACTED] LOSS DATE 7/23/1988 PAYMENT NO 1 19 124963 J

Comprehensive Description	Amount	Rate	Policy
COMPREHENSIVE - PUT, CAC, OR LOW	39,385.54	311	2

DATE 8/10/1988
 AMOUNT \$5,385.54
 TAX

ENTERED BY **DEARCE, MARLENE**
 AUTHORIZED BY **DEARCE, MARLENE**
 PHONE **(305) 252-8787**

REFERENCE total loss settlement
 0001/CAP3/280617010085

 **STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY** **1 19 124963 J**
 FLORIDA OFFICE: WESTERHAYEK, FL; ORLANDO, FL
 SUNPLANT BK CENTRAL FL, NA 62-215/431
 8/10/1988

ISSUED: [REDACTED] CLAIM NO: [REDACTED] LOSS DATE 7/23/1988

EXACTLY FIVE THOUSAND THREE HUNDRED FIFTY-FIVE AND 54/100 DOLLARS

Pay to the Order of: **CHASE AUTO FINANCE ON BEHALF OF** [REDACTED]
 TAMPA FL [REDACTED]

APPROVED BY

Description	Amount	CR	Pay. Cd
RENTAL REIMBURSEMENT	\$200.00	501	2

DATE 8/11/1999
 AMOUNT \$200.00
 TIN

ENTERED BY AENLE, SONIA
 AUTHORIZED BY MARTINEZ, JOSEFINA
 PHONE (305) 275-0359

RENDS



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY
 FLORIDA OFFICE
 WINTERHAVEN, FL
 KENDALL 19-104 L043

WINTERST BK CENTRAL FL, RA 63-215/631
 ORLANDO, FL

1 19 600138 J
 8/11/1999

INSURED [REDACTED]

CLAIM NO [REDACTED]

LOSS DATE 7/23/1999

..... EXACTLY TWO HUNDRED AND 00/100 DOLLARS [REDACTED]

Pay to the
 Order of [REDACTED]
 SOUTH MIAMI FL [REDACTED]

APPROVED BY

FIRE/RESCUE

WHEN REQUESTING INFORMATION OR REPORTS CONCERNING THIS INCIDENT,
PLEASE REFER TO:

9094901

Incident Number

7/23/99

Incident Date

Rescue Reports are available approximately 1 week after the incident; 2 weeks for Fire Reports.

FIRE RESCUE DEPARTMENT

Central Records
8175 N.W. 12 Street
Suite 320
Miami, FL 33186

To obtain a report
call recorded
message at
(800) 716-7860 or
see instructions
on back of card.

1250-12 000

8/2

FIRE / PROPERTY RECORD

UNIT REPORTING SHIFT
214

DEPT 30 INCIDENT NUMBER 9097401 CITY 072399 STATE FL ZIP 33179

PROPERTY ADDRESS [REDACTED]

OWNER NAME LAST NAME FIRST NAME MIDDLE INITIAL PROP SEQUENCE
[REDACTED] 01

STRUCTURE TYPE STORES HEIGHT SQUARE FEET OCCUPANT TOTAL TYPE ON SCENE LOSS IN \$
8 31 4 8 14 75

OCCUPANT NAME SAME SPECIFIC PROPERTY 965 MOBILE PROPERTY 11

APPROXIMATE DAMAGE OR 1ST UNIT ARRIVAL FLAME SMOKE WHEN FIRE OUT FLAME SMOKE COND OF FIRE ON ARRIVAL FLAME TRAVEL FACTOR METHOD EXTINGUISH OBSTACLE TO CONTROL
1 1 1 1 4 98 5 8
SUBJECT TYPE POWER SUPPLY PERFORMANCE SPRINKLER SYSTEM HEADS OPERATED COVERAGE
8 8 9 8 0 8

VEHICLE MAKE MODEL YEAR MAKE YEAR TAG STATE VIN

97 CADILAC JOURNAL YEAR 06-04 FC 166K552Y4VU841955

EQUIPMENT INVOLVED FORM MATERIAL IGNITED TYPE MATERIAL IGNITED
01 AUTO 65 GASOLINE 213 GASOLINE

FORM HEAT IGNITION IGNITION FACTOR STRUCTURE LOSS
16 FUEL 54 LEAK 25000

AREA OF ORIGIN LEVEL ORIGIN FIRE CONTENTS
3 ENGINE 11

EXTINGUISHED BY TYPE OF WATER USED GALLONS TO CONTROL TOTAL DEBS WATER SURVEY TYPE

50 100 8

GROUND AERIAL LADDERS LADDERS (V/W) (T/W) FIRE RELATED CASUALTIES FIRE DEPT PERSONNEL SUPPORT PERSONNEL OTHER PERSONNEL INJURY DEATH

PERSONNEL OF UNIT REPORTING
P. GROSS
P. HEARN
P. JACKSON
LT. GEORGE

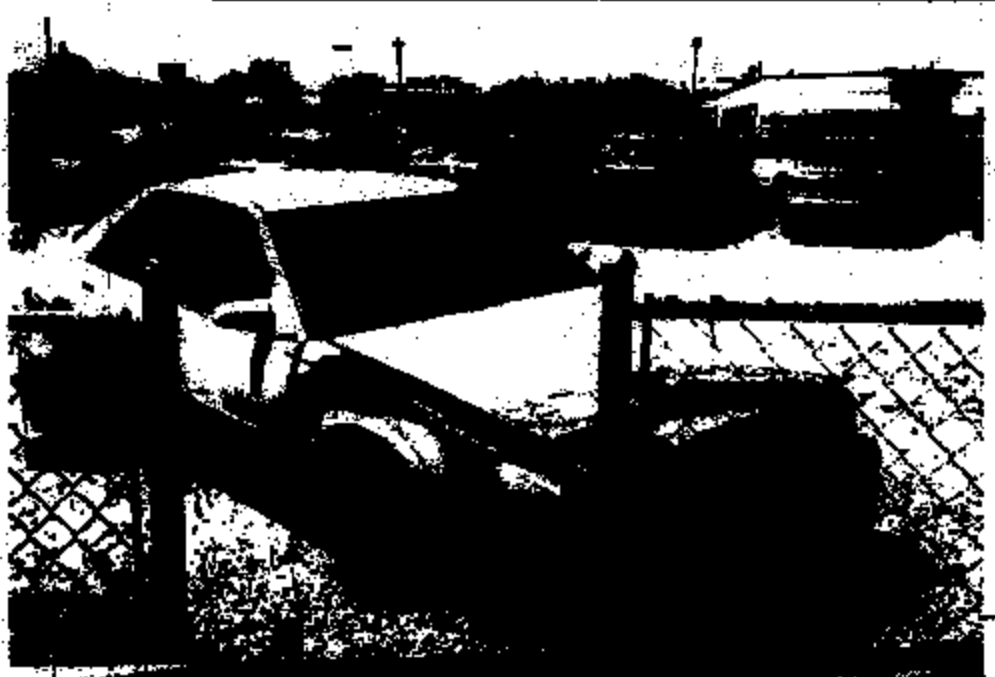
NARRATIVE E-14 FD BU FIRE IN ENGINE COMP CAR JUST REPAIRED AT DEALER. E-14 EXT FIRE WITH HOUSTON AREA TOWN INC 09

CERTIFIED TRUE COPY
OF THE ORIGINAL DOCUMENT ON FILE WITH
THE BROWARD COUNTY FIRE RESCUE
SECTION 1
8175 N.W. 11th St. Suite 6000
Broward, Florida 33411

FEB 15 2000

J.P.

RECORDED



AREA OF DAMAGE

Lined area for describing damage in the first photograph.



AREA OF DAMAGE

Lined area for describing damage in the second photograph.



AREA OF DAMAGE

Lined area for describing damage in the third photograph.

AREA OF DAMAGE

AREA OF DAMAGE

AREA OF DAMAGE



INTRODUCTION: OKAY MY NAME IS JAVIER AREAS I'M WITH THE STATE FARM INSURANCE COMPANY. MY PHONE NUMBER'S AREA CODE 305-252-6751. THERE'S GOING TO BE A RECORDED INTERVIEW THE PERSON BEING INTERVIEWED IS [REDACTED] IN REGARDS TO A VEHICLE THAT CAUGHT ON FIRE A '97 CADILLAC SEVILLE. THE DATE OF LOSS WAS JULY 23RD, 1999.

- Q. Okay. [REDACTED] are you aware that there's going to be a recorded statement?
A. Yes I am.
- Q. Do I have your full permission to take a recorded statement?
A. Yes you do.
- Q. Okay please state your first name spell your last name for me please?
A. [REDACTED]
- Q. Okay and your home address?
A. [REDACTED] in South Miami, Florida.
- Q. Okay your date of birth?
A. [REDACTED]
- Q. And your home phone number?
A. [REDACTED]
- Q. Okay how long have you lived at that address?
A. Um probably about 20 years.
- Q. Okay and for ID purposes do you have your driver's license number?
A. I can give it to you in just a minute...
- Q. Okay.
A. It's [REDACTED] as in [REDACTED] dash [REDACTED] dash [REDACTED] dash [REDACTED] dash [REDACTED]
- Q. Okay and who's your employer?
A. I'm retired.
- Q. Okay. (Pause) How long have you had this vehicle?
A. Ah it would have been two years old on August the 2nd.
- Q. You bought this vehicle new?

- A. Yes I did.
- Q. Okay. And who usually drives this vehicle?
- A. I'm the only driver.
- Q. Okay. Who's the company or the body shop or the mechanical place who does the maintenance on your vehicle?
- A. The dealer Williamson Cadillac.
- Q. Okay. Have you had any problems in the past with this vehicle?
- A. No.
- Q. Okay do you know how many miles you have do you have on this vehicle?
- A. I believe there are about 24,000 miles I could tell you exactly if I look at the work order but I think it's about 24.
- Q. Okay and you said that you you took your vehicle into the dealership for what type of maintenance?
- A. I took it in for an oil change. And told 'em at the time that it was beginning to be hard to start.
- Q. Okay. So did they did the dealership do any additional type of work besides the oil change?
- A. Yes they replaced the fuel oil regulator and an exhaust pipe under the warranty.
- Q. Okay. That needed to be replaced the exhaust pipe?
- A. I have no idea.
- Q. They just told you that they just went ahead and...
- A. That's that's what I read on the work order...
- Q. Okay so...
- A. On the on the ticket.
- Q. Then it was on your warranty?
- A. Yes.
- Q. Okay and when did you drop off your vehicle at the dealership?
- A. I left it at 8:30 in the morning on Friday the 23rd.
- Q. Okay.
- A. And I picked it up about 4:30 that same day.

Q. And where did you go from the dealership did you go back home or...

A. I drove it from the dealership home. And was here for about five minutes and...

Q. How far is it from the dealership to your house?

A. It's probably about three miles.

Q. Okay and what happened when you got home?

A. And then I left again and about five minutes and drove it to the shopping center about a mile away.

Q. Um hum.

A. And when I came outta the shopping center it was very difficult to start. I finally got it started and it would not go more than about five miles an hour I, debated whether or not to just park it and call a tow truck but I thought as long as I could get it to move forward I would just take it back to the dealer.

Q. Okay so you took the car back to the dealer?

A. No I was in route to the dealer.

Q. Okay more or less on what street?

A. I was driving south on 57th Avenue.

Q. Okay.

A. And ah cars behind me were passing me and one began honking and motioning at me and I thought he was just irritated because I was going so slow so I knew I couldn't do anything about it but just continued on. Finally um a car in front of me pulled off the road and the driver jumped out and started frantically waving me off to the side of the road.

Q. Okay.

A. And I decided I'd better pull over and at that point I did not have any brakes.

Q. Oh you d- the car had no brakes at all?

A. And by this time I noticed flames coming from under the hood and...

Q. The hood...

A. He was yelling at me to get outta the car.

- Q. Okay where if you could where was the fire coming from? Was it from the front of the bar or vehicle the back was it...
- A. It w- it was under the coming out from under the hood...
- Q. From the engine...
- A. Then I assume that they were seeing flames underneath the car before I could see them.
- Q. Okay so you pulled over?
- A. I pulled over jumped outta the car.
- Q. Okay you actually jumped out of the car the car was y- you jumped out of the car while the car was moving?
- A. No no I- I stopped...
- Q. You were able to stop the vehicle okay...
- A. I was abl- yeah because I was not going very fast.
- Q. Yeah but the you said that at that time the brakes were not working?
- A. That's correct.
- Q. Okay but you were a- able to stop?
- A. Yes.
- Q. You pulled to the side and you got out of the car?
- A. Right.
- Q. What happened after that?
- A. Um after that the fire department came. And it took 'em about 20 to 30 minutes to get the fire out. And I in the meantime called the dealer.
- Q. Okay.
- A. And the Assistant Service Manager whose name is Clarence.
- Q. Okay.
- A. Who had gotten the car for me when I picked it up. Came over to w- where I was and looked at the car and he said at that time you know when I brought your car up I thought I smelled gas.
- Q. Okay does the assistant manager of dealership?
- A. The Assistant Service Manager...
- Q. Assistant Service Manager...
- A. Yes I don't know his last name his first name is Clarence.

- Q. Okay so it's he actually went out where the the vehicle caught fire where it had stopped...
- A. Yes and then he took me back to the dealership and got a rental car for me.
- Q. Okay and your car was towed back to the dealership?
- A. Correct they arranged for a tow truck. Oh his last name is Todd T-O T-O-D-D.
- Q. Okay and then they got a car now this was still Friday?
- A. It's still Friday. It was about an hour after I had it was about 5:30 so it was only about an hour...
- Q. After you had picked up the vehicle?
- A. Correct.
- Q. So they got you a rental car and you went home?
- A. Correct.
- Q. Okay have you spoken to them since Friday?
- A. Ah I received a phone call today this morning...
- Q. Um hum from...
- A. From a Bruce Paine P-A-I-N-E.
- Q. Um hum.
- A. Who said that he is the Fixed Operation Manager for Williamson Cadillac.
- Q. Um hum.
- A. And he had just found out what had happened and he had been ah he's in touch with the Cadillac people.
- Q. Okay.
- A. Because he wanted them to come down and look and see if ah...
- Q. What what is the dealership thinking that happened to the car what was cause of the loss? Wh- what caused the fire do they know or do they have any...
- A. That's why they want the engineer to come down and look at it.
- Q. They have no idea at this time?
- A. Ah not at this time however I told 'em that it was because of their incompetence and or negligent that my life was put at risk.

- Q. I'm sorry can you repeat that again?
A. I told Mr. Paine...
- Q. Um hum.
A. That it was as a result of their incompetence and or negligence that my life was put at risk.
- Q. Okay.
A. And he indicated that they would have to look into it that there were such things as coincidences.
- Q. Okay. And right now okay I see. Is there anything else you want to add to this statement?
A. I don't think so.
- Q. Okay let's go ahead and close this statement I don't have any any further questions for you.
A. Okay.
- Q. Are there are the remarks that you have made in this recording been true to the best of your knowledge?
A. Ah yes they are the only thing that I haven't told you is how upset I've been over this whole thing a sleepless nights all I can see is the flames coming out from under that car and considering what could've happened.
- Q. Okay and has this recording been made with your full knowledge and consent?
A. Yes it has.
- Q. Okay thank you very much and I want to go ahead and turn off the recording.
A. Okay.

TESX/V245088.209

PRE-LOSS CONDITION

INTERIOR: (Explain if other than average condition for year, make and model vehicle)

Seats: _____ Above Avg. Avg. Below Avg.

Carpets: _____ Above Avg. Avg. Below Avg.

Glass: _____ Above Avg. Avg. Below Avg.

Dashboard: _____ Above Avg. Avg. Below Avg.

Headliner: _____ Above Avg. Avg. Below Avg.

EXTERIOR: (Explain if other than average condition for year, make and model vehicle)

Sheet Metal: _____ Above Avg. Avg. Below Avg.

Paint: _____ Above Avg. Avg. Below Avg.

Trim: _____ Above Avg. Avg. Below Avg.

MECHANICAL: (Explain if other than average condition for year, make and model vehicle)

Engine: _____ Above Avg. Avg. Below Avg.

Transmission: _____ Above Avg. Avg. Below Avg.

PRIOR DAMAGE: Yes No **Prior Damage Estimate Written:** Yes No Amount \$ 50 **Damage Location:** F - S - R - A

OVERALL CONDITION: Above Avg. Avg. Below Avg. MARTINEZ A **Inspector**

Salvage will be: Rebuilt Sold for parts Scrapped **DATE**

TOTAL LOSS SETTLEMENT

Method used to determine base price. (Check one) Computerized Evaluation Comparable Vehicles Book Value Evaluation

Name of Vendor: _____ Amount \$ _____

Did you pay the computerized evaluation amount? Yes No If No, explain: _____

Source & Telephone Number	Quote By	Date	Make & Mod	
1.				31,588-00
2.				300-00
3.				31,888-00
Circle vehicle number(s) used to determine base price: (1. 2. 3.) Explain any adjustments for different prior damage, etc.:				31,888-00
Book(s) used:				5,008-00
List additions or deductions for equipment, mileage, etc. and prior damage:				26,888-00
Did you pay this amount? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, explain:				0-86
				1,613-28

		SALVAGE DEPOSITION		Name of Insurer	
Base Price	\$ 31,888.00	Date Sold	9-29	From	33,826-28
Tax	+ 1,938.28	Date Reimburse Received	10-4		33,826-28
Fees	+ 53,226.28	High Salvage Bid	2700		500-00
Actual Cash Value	= 53,226.28	Towing Expense	0		33,326-28
Owner Retained Salvage	-	Mileage Expense	0		5355.54
Deductible	- 500.00	Maintenance Expense	67		27970.74
Insurer Payoff	= 53,555.28	Total Salvage Payout	2567		
Amount Paid Owner	\$ 27,970.74				
Date Settled	10/14				



AFFIDAVIT OF VEHICLE FIRE (All Questions Must Be Completed in Ink)

1. Name of Insured [REDACTED] Name of Owner [REDACTED]
 Address [REDACTED] 77 Miami FL Home Phone [REDACTED]
 Date of Birth [REDACTED] Marital Status: Married Single No. of Dependents 0
 Social Security No. [REDACTED] (Optional) Driver's License No. [REDACTED]
 Occupation RETIRED
 Employer's Name n/a
 Address n/a Phone [REDACTED]

2. Date of Fire 7-23-99 Time 5:15 A.M. P.M.
 Make of Vehicle CADILLAC Year '97 Model SCORPIO SAS Body Type 4DR SEDAN Color SILVER BLOSS
 Vehicle ID # 1G6K562Y4V4841955 License Plate # [REDACTED] State FL
 Certificate of Title # [REDACTED] If none, why? FINANCED THROUGH CREDIT AUTOMOBILE FINANCE
 Number of cylinders 8 H.P. or C.I. or Liter 4.6 LITER Odometer reading 25,150
 Was vehicle locked? Yes No Were windows rolled up? Yes No
 When did you last see your vehicle? Date 7-23-99 Time [REDACTED] A.M. P.M.
 Specific location where vehicle burned SW 67 Ave + 61 Ave.
 Reason vehicle was left at this location n/a
 Name and address of person who left auto at this location n/a
 Their driver's license no. [REDACTED]

When was the fire discovered? Date 7-23-99 Time 5:15 A.M. P.M.
 Who made the discovery? DRIVERS OF CARS IN FRONT + BEHIND ME
 When was fire reported to fire department? Date 7-23-99 Time 5:30 A.M. P.M.
 Name and Location of Fire Station MIAMI-DADE FIRE AGENCY - INCIDENT # 9894901

Describe fire (where, color of smoke, cause): UNDERNEATH + UNDER HOOD + BURNING ZONE - DRIVERS HAD JUST REACHED FUEL PUMP REGULATOR + EXHAUST PIPE, AN HOUR EARLIER.

Was vehicle being driven? Yes No Describe exactly what happened prior to noticing smoke or fire (electrical or mechanical malfunction): CAR HAD TO STOP - WOULD ONLY GO "HONK" 5 MPH WITH ACCELERATOR - THE FIRE FLAME. I WAS ON MY WAY HOME TO THE BEACH AT 7:00.

Were you carrying a container of flammable liquid in the vehicle at the time of fire? Yes No
 If yes, give type of liquid [REDACTED], amount [REDACTED], size and type of container [REDACTED], location of container at time of fire [REDACTED]

Did you smell smoke or see flames first? I SAW FLAMES WHEN I WAS ON MY WAY HOME TO THE BEACH AT 7:00.

Have you had similar problems prior to fire? Yes No If Yes, explain: _____

Has vehicle been damaged during the past three years? Yes No If so, give location _____

_____, type of damage _____, amount of damage \$ _____, and date _____

Were repairs made? Yes No Partial If so, were they completed? Yes No

Who made the repairs? _____

Name and address of insurance company who paid claim damages, if any: _____

Any other claims in the last three years on this or any other auto? Yes No

Any other vehicles in your household? Yes No

Name of insurance company and agent on other vehicles _____

Your prior insurance company and agent _____

Any homeowners claims within the past 6 months with State Farm? Yes No

With any other carrier? NO

3. Vehicle Equipment (Check if vehicle had any of the following)

- | | | | | | |
|---|---|---|--|--|---|
| <input type="checkbox"/> Radio AM | <input checked="" type="checkbox"/> Power Steer. | <input type="checkbox"/> Vinyl Roof | <input checked="" type="checkbox"/> Cruise Control | Tires: | Transmission: |
| <input checked="" type="checkbox"/> AM/FM | <input checked="" type="checkbox"/> Power Brakes | <input checked="" type="checkbox"/> Tinted Glass | | <input type="checkbox"/> W/W | <input checked="" type="checkbox"/> Automatic |
| <input checked="" type="checkbox"/> Stereo | <input checked="" type="checkbox"/> Power Locks | <input type="checkbox"/> Mag Wheels | | <input checked="" type="checkbox"/> Radial | <input type="checkbox"/> Standard |
| <input checked="" type="checkbox"/> Tape Deck | <input checked="" type="checkbox"/> Power Windows | <input type="checkbox"/> T-Tops | | <input type="checkbox"/> Special | <input checked="" type="checkbox"/> Console |
| <input checked="" type="checkbox"/> Air Cond. | <input checked="" type="checkbox"/> Power Seats | <input checked="" type="checkbox"/> TR Steering Wheel | | | |

Other: 12 SP CRUISE-TRIP COMPUTER - POWER SEAT - POWER MIRROR MIRROR - LEATHER UNDER FLOOR

CB Radio Type _____ Cost \$ _____ Date Installed _____

Purchased From: WILLIAMSON CADILLAC

4. Vehicle Condition

- | | | | |
|--------------|-------------------------------|-------------------------------|---|
| Paint | <input type="checkbox"/> Fair | <input type="checkbox"/> Good | <input checked="" type="checkbox"/> Excellent |
| Transmission | <input type="checkbox"/> Fair | <input type="checkbox"/> Good | <input checked="" type="checkbox"/> Excellent |
| Engine | <input type="checkbox"/> Fair | <input type="checkbox"/> Good | <input checked="" type="checkbox"/> Excellent |
| Body | <input type="checkbox"/> Fair | <input type="checkbox"/> Good | <input checked="" type="checkbox"/> Excellent |

Other distinguishing features: (dents, decals, trailer hitch, interior, etc.)

Name and address of service station/garage: _____

Who performs routine maintenance service? WILLIAMSON CADILLAC Date last serviced 7-22-99

Who performs State MV inspection? _____ Date last inspected _____

6. Date car purchased P-2-97 New Used Purchase price \$ 46,629.00

Trade-in _____ Allowance _____

Seller Dealer/Individual Name and Address Williams & Co. 7250 N. Kendall Dr. Miami, FL 33156

How did you learn the car was for sale? _____

How was the car paid for? Cash Check

If financed, name and address of finance company CHASE Automobile Finance

Account # 27 29 9919 010065 Balance Due \$ 5,340.78 (^{month} 9/99) Loan Terms 7.25% Months 36

Date of last loan payment made 7/99

Is account past due? Yes No How long? _____

Are keys in your possession? Yes No Ignition key # _____ Trunk key # _____

Do you have other theft insurance? Yes No Policy # _____

Name of insurance company _____

Was this a rebuilt wreck? Yes No If yes, name of rebuilder _____

Was it a recovered theft? Yes No If yes, date of theft _____

7. Amount for which you are making claim \$ _____

NOTE: For your protection, the law of your state requires the following to appear on this form: Any person who knowingly, and with intent to injure, defraud, or deceive any insurance company, files a statement of claim containing any false, incomplete, or misleading information, may be guilty of a felony and subject to criminal and civil penalties. Florida only: Violation of this provision is a felony of the third degree. Oklahoma only: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

Witness [Redacted] Policyholder [Redacted]
Address Miami, FL [Redacted]

SUBSCRIBED AND SWORN TO BEFORE ME this 30 day of July, 1999

in Miami County, Florida

Notary Public Dennis Fayer My commission expires _____



State Farm Insurance Companies



State Farm Insurance Companies
15085 SW 122 Avenue
Miami, FL 33186

305-252-8700
305-252-6752 (fax)

December 16, 1999

NO DMV
NO 40
1241 / 1/3/00

ESIS
RENAISSANCE CENTER/MAIL CODE 482-C20-D71
P.O. BOX 300
DETROIT, MICHIGAN 48265-3000

RECEIVED

RE: Claim Number : [REDACTED]
Date of Loss : July 23, 1999
Our Insured : [REDACTED]
Your Reference: [REDACTED]

Dear ESIS Claims department:

We have been informed that you are the insurance carrier for the party designated as your insured in the caption of this letter. Our investigation established that your insured was responsible for the damages to our policyholder's vehicle.

Enclosed you will find our subrogation supports.
\$27,970.74 to insured + \$5,355.34 to lienholder + \$500.00
Deductible + \$200.00 loss of use = \$34,026.28 - \$2,517.
19 for salvage. Total subrogation amount \$31,509.09.

Please accept this letter as a notice of our subrogation rights and communicate with us in regards to your position in this matter.

Sincerely,

Javier Areas
Claim Representative
(305) 252-6751

State Farm Mutual Automobile Insurance Company

State Farm Insurance Companies



May 10, 2000

MAY 12 2000

State Farm Insurance Companies
16000 SW 122 Avenue
Miami, FL 33186

305-252-6700
305-252-6752 (fax)

BSIS

Attn: Greg Thrasher
300 Renaissance Center/Mail Code 482 C20 D71
Detroit, MI 48265-3000

754
404906

RE: Claim Number: [REDACTED]
Date of Loss: [REDACTED]
Our Insured: [REDACTED]

Dear Mr Thrasher:

Please be inform that we are waiting for status on or subrogation. Your file number is [REDACTED] and your client is General Motors Corporation. Please communicate with us in regards to your position in this matter.

Sincerely,

Javier Areas
Claim Representative
(305) 252-6751

State Farm Mutual Automobile Insurance Company

ESIS

An Insurance Brokerage Company

ESIS Insurance Control Group
200 Renaissance Center
Mail Code 485 500-571
Detroit, MI 48209-5000

1.800.485.0194 ext

yvette.young@esis-ins.com

Yvette M Young
Claims Administrator

August 21, 2000

State Farm Insurance Company
185 N Randall Rd
Beverly IL 60310
Attn: Barbara Edens

Your File Number: [REDACTED]
Our File Number: 410674
Date of Event: 6/4/99
Claimant: [REDACTED]
Client/Account: General Motors

Dear Barbara:

We are the third-party administrator on behalf of General Motors Corporation for matters involving allegations of product liability.

In that regard, We are in receipt of your correspondence dated August 8, 2000. Your correspondence alleges that your insured's vehicle sustained property damage as a result of a manufacturer's product defect. Please provide me with:

- A copy of the repair estimate for the prior accident indicating what parts were replaced ✓
- Information regarding the radio that was installed. Who is the installer? When was the date of installation? ✓
- Proof of payment and fire department report. Pending
- A copy of the damage estimator deeming the vehicle a total loss ✓
- A copy of the report prepared by Mr. Sawtelle ✓

As soon as the requested information has been received, a technical evaluation of this matter will be completed. Upon the conclusion of our evaluation, We will contact you with our position.

Also, you have the obligation and responsibility to ensure that the subject vehicle and its related components are maintained and preserved in their present condition for so long as you intend to pursue a claim and/or cause of action. We will be unable to determine if a physical inspection of the subject vehicle would be necessary until we have had the opportunity to thoroughly evaluate your supporting technical documentation.

Sincerely,

Yvonne M Young

STATE FARM INSURANCE COMPANIES

185 N Randall Rd
Bloomington, IL 60010
(800) 408-8082
FAX (800) 408-8086

September 14, 2000

ESIS/GM CLAIMS
Renaissance Center
Mail Code 482C200711
PO Box 300
Detroit, MI 48265-3000
Attention: Greg Thresher
CERTIFIED MAIL- RETURN RECEIPT REQUESTED

712
410674
ESIS-

SEP 19 2000

Our Claim Number: [REDACTED]
Our Insured: [REDACTED]
Date of Loss: 6 4 99
Amount of Loss: \$16,439.59
Vehicle: 1995 Glds Aurora
VIN: 1G3GR62CS84117759
Your File: PD-080400

Dear Greg:

*** Status ***

The documents were sent to you per your request on 8/8/00. Since that is over 30 days ago, and I have not heard from you since, please advise the status of our subrogation.

The vehicle is being held at an offsite location. Please call to schedule an appointment if you wish an inspection of the vehicle.

Sincerely,


Barbara Edens
Claim Specialist

STATE FARM INSURANCE COMPANIES

195 N Randall Rd
Bolingbrook, IL 60440
(800) 405-8013
FAX (800) 405-8035

September 18, 2000

ESIS/GM CLAIMS
Renaissance Center
Mail Code 482C200711
PO Box 300
Detroit, MI 48265-3000
Attention: Yvette Young
CERTIFIED MAIL- RETURN RECEIPT REQUESTED

RECEIVED
SEP 21 2000
ESIS-GM CLAIMS UNIT

Our Claim Number:	[REDACTED]
Our Insured:	[REDACTED]
Date of Loss:	09-15-00
Amount of Loss:	\$16,439.59
Vehicle:	1995 Olds Aurora
VIN:	1G3GR62C554117759
Your File:	410674

Dear Yvette:

Enclosed find the documents you requested. The fire report has been ordered and will be forwarded when I receive it.

Sincerely,

Barbara Eders
Claim Specialist

**FAX****DATE: September 25, 2000****NOTICE: PRIVATE AND CONFIDENTIAL**

The information contained in this facsimile message contains private and confidential material and/or trade secret material intended for the sole use of the individual named above. If you are not the intended recipient listed above, you are hereby notified that any disclosure, duplication, or distribution of this information or the taking of any action in reliance on the contents of this transmission, without the express written consent of the State Farm Insurance Companies, is **STRICTLY PROHIBITED**. If you have received this transmission in error, please notify us immediately by telephone so that we can arrange for the return of this material at no cost to you.

TO: Yvette Young**FAX: 313-885-0911****Your File: 410674****STATE FARM INSURANCE**

185 N Randall Rd / Deerfield, IL 60010

FROM: BARBARA EDENS**FAX: (630) 486 8936****PHONE: (630) 486 8052****SUBJECT: claim # 13 9488 188 VIP****ATTACHMENTS : (1) police report****MESSAGE:**

Enclosed find the police report per your request. I have tried to get the fire report without success.

Thanks,
Barb

Yvette M. Young
Claims Administrator
EIS-EM CLAME

EIS

An Insurance Services Company

September 25, 2000

State Farm Insurance Company
185 N Randall Rd
Batavia IL 60510
Attn: Barbara Edens

390 Renaissance Center
Mail Code 462 CSO D71
Detroit, MI 48226-2000
Telephone: 1.800.888.0164
yvette.young@eis-ins.com

Your Claim Number: [REDACTED]
Eis File Number: 410674
Date of Event: 6/4/99
Your Insured: [REDACTED]
Our Client: General Motors Corporation

Dear Barbara:

Please be advised, I have had this file referred for technical evaluation. Upon the conclusion of this evaluation, I will contact you with our position in this matter. Please allow 4-6 weeks for the evaluation results.

Thank you for your time and cooperation.

Sincerely,

Yvette M Young

State Farm Insurance Companies



December 1, 2000

Claim Office
185 North Randall Road - Suite 3
Bellaire, Illinois 60010-8470
Phone: (800) 486-6000
Fax: (800) 486-6000

ESISGM CLAIMS
Renaissance Center
Mail Code 482C20D711
PO Box 300
Detroit, MI 48266-3000
Attention: Yvette Young
CERTIFIED MAIL - RETURN RECEIPT REQUESTED

RECEIVED

DEC 08 2000

ESIS-GM CLAIMS UNIT

Our Claim Number: [REDACTED]
Our Insured: [REDACTED]
Date of Loss: 6/4/99
Amount of Loss: \$18,438.58
Vehicle: 1995 Olds Aurora
VIN: 1G3GR82C8B4117759
Your File: 418574

Dear Yvette:

Please advise the status of our subrogation claim submitted to you with final documents on 9/25/00.

Sincerely,

Barbara Elders
Claim Specialist

Yvette M Young
Claims Administrator
ESIS-GM CLAIMS




ESIS

An Insurance Services Company

December 8, 2000

300 Renaissance Center
Mail Code 483 C20 D71
Detroit MI 48265-2000
Telephone: 1.800.888.0164
Facsimile: 313.665.0911

State Farm Insurance
185 N Randall Rd
Batavia IL 60510
Attn: Barbara Edens

Your File Number: 
Your Insured: 
Our File Number: 
Our Client: General Motors
Date of Event: 6/4/99

Dear Barbara:

This will have reference to your product liability subrogation claim filed with General Motors Corporation on behalf of your above-mentioned insured.

We have completed our review of the above-referenced matter. Based on the material and information available, our analysis does not disclose that a manufacturer's product defect was a causative factor in the above incident. ESIS, on behalf of General Motors will therefore, be unable to offer any assistance in this matter.

Thank you for allowing us the opportunity to review this matter. If it is your intent to pursue this matter further, the subject vehicle along with any alleged defective components should be preserved for possible additional inspection at a later date.

Sincerely,

Yvette M Young

09/28/00 MON 10:36 FAX 830 406 8038 FAX: 312-372-9182 STATE PARK ENAVIA

REPORT NUMBER: [REDACTED] DAMAGE TO PERSONAL PROPERTY FIRE (CAR) D 337811
DATE: 7 June 2003 TIME: 7:11 AM
REPORTING OFFICER: 259 DATE: 7 June 2003

PLATE: [REDACTED]	VEHICLE: [REDACTED]	MAKE: [REDACTED]	MODEL: [REDACTED]	YEAR: [REDACTED]	TYPE: [REDACTED]	STATUS: [REDACTED]	OWNER: [REDACTED]	ADDRESS: [REDACTED]	CITY: [REDACTED]	STATE: [REDACTED]	ZIP: [REDACTED]
<p>1.121 / 105 264 282 / 105 / 105</p>											

LA INTEREST AND ARSON

ALL DAMAGE TO PERSONAL PROPERTY

ALL DAMAGE TO REAL PROPERTY

ALL DAMAGE TO VEHICLES

ALL DAMAGE TO PERSONS

ALL DAMAGE TO ANIMALS

ALL DAMAGE TO PLANTS

ALL DAMAGE TO STRUCTURES

ALL DAMAGE TO EQUIPMENT

ALL DAMAGE TO RECORDS

ALL DAMAGE TO OTHER PROPERTY

1500S 500 1636R62CS5411229

15457 CASUALTY VICTIM STATED HIS VEHICLE ON FIRE FOR NO REASON

REASON AFTER HAVING REPAIRS MADE 2 DAYS AGO

ODS MOBILE REPAIRED HIS VEHICLE HOWEVER SOMETHING WAS WRONG

ONE DAMAGE AND NO DAMAGE CAUSED BY THE FIRE STATE PARK DAMAGE RUDOLPH

Huck & S. [Signature]

Quetz [Signature]

11/21/2000

(101)

ALSO ON FILE
LEO 4/10
10/10/00
8/8/00

STATE FARM INSURANCE COMPANIES

185 N Randall Rd
Deerfield, IL 60015
(830) 406-8032
FAX (830) 406-8038

July 26, 2000

ESIS -
AUG 01 2000
CMD

ESIS/GM CLAIMS
Renaissance Center
Mail Code 482C28D711
PO Box 300
Detroit, MI 48265-3000
Attention: Greg Threaber
CERTIFIED MAIL- RETURN RECEIPT REQUESTED

Our Claim Number: [REDACTED]
Our Insured: [REDACTED]
Date of Loss: 6 4 99
Amount of Loss: \$16,439.59
Vehicle: 1995 Olds Aurora
VIN: 1G3GR62C354117759
Your File: UNKNOWN

Dear Greg:

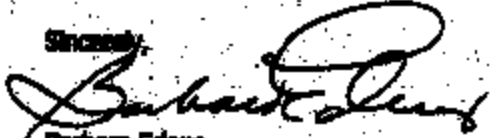
The above vehicle was involved in a fire loss. Damage to the vehicle resulted in a total loss in the amount of \$16,439.59.

Our investigation indicates the cause of the fire as follows.

The fire originated at the bulkhead where fuel vapors were leaking in the immediate area of the nylon fuel lines and metal fuel lines. Upon ignition of the vapors, the fire extended causing the damage present. The fire was due to the leakage of fuel vapors in the area of the fuel line connections.

Please accept this letter as notice of a subrogation claim in the amount of \$16,439.59

The vehicle is being held at an offsite location. Please call to schedule an appointment if you wish an inspection of the vehicle.

Sincerely,

Barbara Edens
Claim Specialist

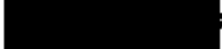
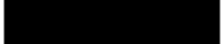

ESIS

An Insurance Services Company

August 4, 2000

Barbara Edens
State Farm
185 N. Randall Road
Batavia IL 60510

300 Renaissance Center
Mail Code 483 C20 D71
DETROIT, MI 48265-3000
Telephone 800-888-0164
Facsimile 313-665-0911

Your File Number: 
Claimant: 
Our File Number: 
Our Client: General Motors Corporation
Date of Event: 6/4/99

Dear Ms. Edens:

This will acknowledge your claim on the above-referenced matter. In order to evaluate your claim, the following documents and information are respectfully requested:

1. A copy of your expert report which states your theory of liability. Also include the original or laser color copies of the photographs taken by your expert.
2. A copy of the police and/or fire report.
3. A copy of the vehicle operator's statement of events. This should include events prior to and immediately following the incident.
4. Advise if the vehicle owner and/or operator note anything wrong or unusual about the vehicle prior to the incident.
5. Provide copies of all available maintenance, warranty, or repair orders on the subject vehicle. If repairs and maintenance were performed by the vehicle owner, then a chronological summary of operations performed is needed.
6. Advise as to any after-market equipment which may have been installed on the subject vehicle. If applicable, provide copies of receipts and/or invoices for installation of said equipment.

7. Advise as to any modifications, alterations, or changes to the subject vehicle. If applicable, provide copies of relevant installation receipts.
8. Did the vehicle owner receive any Recall Notices for the subject vehicle? If so, please provide copies of the notices.
9. Advise if the subject vehicle was ever involved in any prior accidents. If applicable, identify the nature and extent of the damages and repairs completed.
10. Provide copies of your proof of payment.
11. The present location of the subject vehicle and its availability for inspection.
12. Provide proofs of the transmission and engine oil levels, if applicable.

Upon receipt of the above-requested information and documentation, this matter will be assigned a claim number and further review of this matter will be complete. During this entire process, the subject vehicle should remain available for inspection, if necessary.

If you have any questions, please feel free to contact me at 1.800.888.0164.

Sincerely,

Greg Thrasher

Greg Thrasher
Property Damage Unit

/hmc

1993 BUICK REGAL
 312 PURPLE PEARL METALLIC /V80
 322 SANDSTONE
 ORDER NO. 81901/048 STOCK NO.
 VIN 1G8G82000C8117759

OLDHAMVILLE DIVISION
 GENERAL MOTORS CORP. ON
 920 TOMMASEO STREET
 LANSING MI 48221-0001
 VEHICLE INVOICE 1A804888885

DESCRIPTION	MSRP	INV NET	REMARKS - SOLD
MODEL & FACTORY OPTIONS		29017.85	INVOICE 10/13/94
1993 BUICK REGAL	31370.00		EXEMPTED 10/13/94
OPS ELECTRIC SLIDING GLASS SUNROOF	998.00	852.70	EXE I/T 10/17/94
WITH SUNSHADE			INT COM 10/17/94
FD 50 STATE EMISSION CERTIFICATION	0.00	0.00	TRC NET 10/13/94
LOT ENGINE - 4.0 L. NOME 32-VALVE V6	N/C	N/C	MIWA TRC 0845
DOT CUSTOM LEATHER TRIM	0.00	0.00	WFF-T QWR OPT-1
DOT SANDSTONE	N/C	N/C	
322 PURPLE PEARL METALLIC	N/C	N/C	

BANK: GMAC - 377
 CNO-TO 10-174

SHIP WT: 3861
 HP: 46.2

MEMO 1618.35

TOTAL MODEL & OPTIONS	32368.00	29872.85	ACT 231	29827.00
DEPRECIATION CHARGE	675.00	638.00	S/B 241	870.33
ISSUE ADVERTISING		258.94	ADV 63A	258.32

TOTAL	33043.00	30756.87	FAT 310	30756.87
-------	----------	----------	---------	----------

MEMO: TOTAL LEASE LIABILITY AND
 AFFIRM WHOLESALE FINANCE CREDIT 28315.37

THIS INVOICE MAY NOT REFLECT THE DEALER'S COMPLETE VEHICLE COST IN VIEW
 OF MANUFACTURER'S RECALLS, ALLOCATIONS, IMPROVEMENTS, REWORKS, WHOLESALE
 FINANCE CREDIT, ETC.
 THIS MOTOR VEHICLE IS SUBJECT TO A SECURITY INTEREST HELD BY GMAC.

SEND TO GMAC NO. 277
 VIN 1G8G82000C8117759
 @ 30756.87 INV 1A804888885
 DATE 10/17/94 SERIAL 10-174

TOM BEE'S FINE RIDE OLDHAMVILLE, INC
 541 BIRCH HURST
 BARK RIDGE IL 60089-3143

VINEMPI

DISPLAY VIN\RELATED CAMPAIGNS

KIPBA061
08/25/2000 12:35

1G3GR62C5B4117759 OPEN\CLOSED STATUS:

SEL CODE	CAMPAIGN NUMBER	STATUS	REPAIR DATE	REPAIR PREV. DEALER NUMBER	CAMPAIGN TYPE
-------------	--------------------	--------	----------------	-------------------------------	------------------

NO CAMPAIGNS CURRENTLY AFFECTING THIS VEHICLE

PF 10	MANT	11	VHCP	12	DLRA	13	AUDT	14	XRF	15	DESC	16	ADST	17	NADR	18	DELT	PF	SELECT:	FW:	GOTO:
19	PERF	20		21		22		23		24											

GM Vehicle Inquiry System Summary

Home - Summary - Claim History - Vehicle Build - Delivery Information - Dealer Information - Service Contract -
Warranty Block - Branding Title

Hub

VIN:	1G3GR62C584117159
------	-------------------

VEHICLE INFORMATION

Merchandising Model:	3GR29 - 1995 AURORA SEDAN	Warranty Start Date:	10/24/1994				
Delivering Dealer:	TOM NOB'S PARK RIDGE OLDSMOBILE, INC. 561 BUSSE HIGHWAY PARK RIDGE, IL. 60068-3143 (847) 696-2200	Selling Source:	15 - OLDSMOBILE				
		Site Code:	T0174				
		Business Associate Code:	117304				
Service Contract:	No	Branded Title:	No	Warranty Block:	No	FBI Status:	Paid

CAMPAIGN ELIGIBILITY

Vehicle Has No Current Record Of Outstanding Campaigns: <input checked="" type="checkbox"/>

APPLICABLE WARRANTIES

Description	Effective Date	Effective Odometer	End Date	End Odometer
48/50 BUMPER TO BUMPER - NO DEDUCTIBLE	10/24/1994	0 miles	10/24/1998	50000 miles
72/100 SHEET METAL RUST-THROUGH	10/24/1994	0 miles	10/24/2000	100000 miles
36/36 CORROSION	10/24/1994	0 miles	10/24/1997	38000 miles
48/50 CORROSION	10/24/1994	0 miles	10/24/1998	50000 miles
96/80 PCM/CC BUSHINGS	10/24/1994	0 miles	10/24/2002	80000 miles

CLAIM HISTORY

R.O. Date	R.O. Number	Type	Labor Operation	Odometer Reading
12/16/1997	034600	#	R0843 - CD PLAYER - (REINSTALL CD PLAYER)	47625 miles
12/04/1997	034165	#	R0842 - CD PLAYER - (REMOVE CD PLAYER)	47600 miles
12/04/1997	034166	#	R0842 - CD PLAYER - (REMOVE CD PLAYER)	47600 miles
01/30/1998	112223	#	C3098 - HEADLINING REP IPCE	18445 miles
12/26/1995	111388	#	B7476 - LEFT SIDE FENDER MOLDING R&R OR REPLACE	17459 miles
10/03/1995	109054	#	B5430 - RIGHT REAR COMPARTMENT LID HINGE REPLACE	14317 miles
10/03/1995	109054	#	B5431 - LR LED/TOTE SUP RP	14317 miles
08/09/1995	107671	#	C2860 - CONSOLE ASSY R&R/RP	11494 miles
07/17/1995	106997	#	1995 - CUST COMPLAINT NOT DUPLICATED - ENG. EMISSION	10408 miles
03/27/1995	038926	#	C0300 - R/R DR GLASS ALIGN	4000 miles
03/27/1995	038926	#	C5041 - BUCK ST ADJ R&R/RPL	4000 miles
03/27/1995	038926	#	B4801 - LT FT DGR ASSY AGN	4000 miles

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GM Vehicle Inquiry System Claim History

Links - Summary - Claim History - Vehicle Build - Delivery Information - Dealer Information - Service Contract -
Warranty Block - Service Mile

Hold

VIN:	1G3GR2C584117739
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CLAIM HISTORY

Repair Order Date:	12/16/1997	Repair Order Number:	024420	Odometer Reading:	47625 miles
---------------------------	------------	-----------------------------	--------	--------------------------	-------------

Serviced By:	CURRIE MOTORS OLDSMOBILE 11211 W. CERMAK ROAD WESTCHESTER, IL. 60154-5706 (708) 562-4500	Selling Source:	15 - OLDSMOBILE
		Site Code:	10183
		Business Associate Code:	117312

Cycle	Case	Type	Labor Operation	Part	Comments
01/01/1998	01	#	R0843 - CD PLAYER - (REINSTALL CD PLAYER)	N/A	N/A

Repair Order Date:	12/04/1997	Repair Order Number:	024165	Odometer Reading:	47620 miles
---------------------------	------------	-----------------------------	--------	--------------------------	-------------

Serviced By:	CURRIE MOTORS OLDSMOBILE 11211 W. CERMAK ROAD WESTCHESTER, IL. 60154-5706 (708) 562-4500	Selling Source:	15 - OLDSMOBILE
		Site Code:	10183
		Business Associate Code:	117312

Cycle	Case	Type	Labor Operation	Part	Comments
12/11/1997	02	#	R0843 - CD PLAYER - (REINSTALL CD PLAYER)	N/A	N/A
12/29/1997	01	#	R0842 - CD PLAYER - (REMOVE CD PLAYER)	N/A	N/A

Repair Order Date:	01/30/1996	Repair Order Number:	112225	Odometer Reading:	18445 miles
---------------------------	------------	-----------------------------	--------	--------------------------	-------------

Serviced By:	ED NAPLETON OLDSMOBILE, INC. 727 WEST GRAND AVENUE ELMHURST, IL. 60126-1055 (630) 833-7300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10030
		Business Associate Code:	117310

Cycle	Case	Type	Labor Operation	Part	Comments
02/25/1996	04	#	C3698 - HEADLINING REP 1PCB	N/A	N/A

Repair Order Date:	12/26/1995	Repair Order Number:	111388	Odometer Reading:	17459 miles
---------------------------	------------	-----------------------------	--------	--------------------------	-------------

Serviced By:	ED NAPLETON OLDSMOBILE, INC. 727 WEST GRAND AVENUE ELMHURST, IL. 60126-1055 (630) 833-7300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10030
		Business Associate Code:	117310

00000000-1-05-98

Cycle	Case	Type	Labor Operation	Part	Comments
01/14/1996	01	#	B3416 - LEFT REAR FENDER MOLDING R&R OR REPLACE	25637363 - MLDG N/A	N/A

Repair Order Date:	10/03/1995	Repair Order Number:	109054	Odometer Reading:	14317 miles
--------------------	------------	----------------------	--------	-------------------	-------------

Serviced By:	ED NAPLETON OLDSMOBILE, INC. 727 WEST GRAND AVENUE ELMHURST, IL 60126-1055 (630) 833-7300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10930
		Business Associate Code:	117310

Cycle	Case	Type	Labor Operation	Part	Comments
10/21/1995	03	#	B3451 - LR LID/TGTE SUP RP	25605010 - STRUT ARM	N/A
10/28/1995	01	#	B3420 - RIGHT REAR COMPARTMENT LID HINGE REPLACE	25632911	N/A

Repair Order Date:	08/09/1995	Repair Order Number:	107671	Odometer Reading:	11494 miles
--------------------	------------	----------------------	--------	-------------------	-------------

Serviced By:	ED NAPLETON OLDSMOBILE, INC. 727 WEST GRAND AVENUE ELMHURST, IL 60126-1055 (630) 833-7300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10930
		Business Associate Code:	117310

Cycle	Case	Type	Labor Operation	Part	Comments
08/26/1995	01	#	C2860 - CONSOLE ASSY R&R/RP	25635231	N/A

Repair Order Date:	07/17/1995	Repair Order Number:	106997	Odometer Reading:	10408 miles
--------------------	------------	----------------------	--------	-------------------	-------------

Serviced By:	ED NAPLETON OLDSMOBILE, INC. 727 WEST GRAND AVENUE ELMHURST, IL 60126-1055 (630) 833-7300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10930
		Business Associate Code:	117310

Cycle	Case	Type	Labor Operation	Part	Comments
08/05/1995	03	#	1995 - CUST COMPLAINT NOT DUPLICATED - ENCL EMISSION.	N/A	N/A

Repair Order Date:	03/27/1995	Repair Order Number:	038936	Odometer Reading:	4000 miles
--------------------	------------	----------------------	--------	-------------------	------------

Serviced By:	TOM NOBLE PARK RIDGE OLDSMOBILE, INC. 501 BUSSE HIGHWAY PARK RIDGE, IL 60068-3143 (847) 694-3300	Selling Source:	15 - OLDSMOBILE
		Site Code:	10174
		Business Associate Code:	117304

Cycle	Class	Type	Labor Operation	Plant	Comments
04/08/1995	01	#	CB500 - R/R BR GLASS ALIGN	N/A	N/A
04/08/1995	02	#	GD041 - BUCK ST ADJ R&R/PL	N/A	N/A
04/08/1995	03	#	BWD1 - LT FT DOOR ASSY AGN	N/A	N/A

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M Vehicle Inquiry System Vehicle Build

Home - Summary - Chain History - Vehicle Build - Delivery Information - Dealer Information - Service Contract -
Warranty Book - Recall List

Help

VIN:	1G3GR62CS84117759
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VEHICLE BUILD

Merchandising Model:		30829 - 1995 AURORA SEDAN	
Order Number:	BHB483	Engine Serial Number:	N/A
Build Plant:	1B4Q - ORION ASSEMBLY	Transmission Serial Number:	N/A
Build Date:	10/12/1994	Front Axle Serial Number:	N/A
Gross Vehicle Weight Rating:	2249 kg (4999 lb)	Rear Axle Serial Number:	N/A

OPTION CODES

AQ1 - DRIVER 6WAY POWER	AQ2 - PASS 6WAY POWER SEAT
AK5 - DR/PASS INFLAT RESTRAINT	AL2 - SEAT, POWER LUMBAR
AQ9 - FRT BUCKET RECLINER	A43 - SEAT ADJUSTER, MIRROR, POWER, DRIVER
A80 - FRT DR BT BK PWR RECLIN	A81 - PASS BT BK PWR RECLINER
CP5 - ELECTRIC SUNROOF-GLASS	CJ2 - AIR CONDITIONING
DK2 - DR/PASS REMOTE ELBC	D35 - FLOOR CONSOLE
FES - SPORT CAR SUSPENSION	FED - EMISSION, FEDERAL
FQ2 - TRANSAXLE FINAL DRIVE 3.48	IL3 - INTERIOR DESIGN (L3)
RS - ANTILOCK BRAKES	K80 - ELECTRONIC TRANS-SHIFT
X09 - 140 AMP	L47 - 4.0 LITER V6 MPI GMC
MH1 - F-4 AUTO TRANS	MX0 - AUTO OVERDRIVE TRANS
NP2 - U.S. FEDERAL EMISSIONS	NP5 - LEATHER WRAPPED
NW9 - ELECTRONIC TRACTION CTL	N10 - DUAL PORTY EXHAUST
ORN - ORION, MI, USA	PK0 - ALUMINUM WHEELS
QQW - PASSENGER 14-978 BW R/P/E BT TL AL2	R7A - SALES ITEM NO. 26
REA - SALES ITEM NO. 76	R82 - SALES ITEM NO. 180
U88 - INSTRUMENT CLUSTER	UP0 - AM/FM STER 6SS CARS CD
U87 - POWER ANTENNA	UW5 - 6, CUSTOM
U40 - INSTRUMENT CLST/TKP	VH9 - OWNER INFO MAN
VK3 - LICENSE PLATE BRKT	V43 - CONDENSER, CONTAINS ERR IMP STANDARD FOR FRT F/WH & RE S MTK
V73 - USA/CANADA	VJ7 - INTERIOR "LEATHER" (TO BE USED BY ALL USERS BEGINNING 1997 MODEL YR)

0000000 2/95/00

ISA - OPTION 01

ME - OPTION PA

281

211 - SEAL. UNIT

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GM Vehicle Inquiry System

Delivery Information

Home - Summary - Claim History - Vehicle Build - Delivery Information - Dealer Information - Service Contract -
Warranty Block - Archived Data

Help

VIN: 1G3GR2C384117769

IN-SERVICE INFORMATION

In-Service Information Not On File

DELIVERY INFORMATION

Delivery Date:	10/24/1994	Odometer:	N/A	Delivery Type:	RETAIL/INDIVIDUAL
Delivering Dealer:	TOM MOE'S PARK RIDGE OLDSMOBILE, INC. 591 BUSSE HIGHWAY PARK RIDGE, IL 60068-3143 (847) 694-3200			Delivery Selling Source:	15 - OLDSMOBILE
				Delivery Site Code:	10174
				Business Associate Code:	117304

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OLDSMOBILE

GM Vehicle Inquiry System

Dealer Information

Home - Summary - Claim History - Vehicle Build - Delivery Information - Dealer Information - Service Contract -
Warranty Block - Standard Fee

Help

VIN:	1Q3GR62C584117759
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INVOICE INFORMATION

Invoice Date:	10/13/1994		
Site Address:	TOM NOB'S PARK RIDGE OLDSMOBILE, INC. 501 BUSSE HIGHWAY PARK RIDGE, IL 60068-3143 (847) 696-3200	Selling Source:	15 - OLDSMOBILE
		Site Code:	10174
		Business Associate Code:	117304

SHIP-TO INFORMATION

Ship-To Date:	N/A		
Site Address:	TOM NOB'S PARK RIDGE OLDSMOBILE, INC. 501 BUSSE HIGHWAY PARK RIDGE, IL 60068-3143 (847) 696-3200	Selling Source:	15 - OLDSMOBILE
		Site Code:	10174
		Business Associate Code:	117304

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STATE FARM INSURANCE COMPANIES

100 N Randall Rd
Bartlett, IL 60010
(630) 486-8932
FAX (630) 406-8036

August 8, 2000

410674
ESIS
AUG 15 2000
AUG 15 2000

ESIS/GM CLAIMS
Renaissance Center
Mail Code 482C20D711
PO Box 300
Detroit, MI 48265-3000
Attention: Greg Thresher
CERTIFIED MAIL- RETURN RECEIPT REQUESTED

Our Claim Number: [REDACTED]
Our Insured: [REDACTED]
Date of Loss: 6 4 99
Amount of Loss: \$16,439.59
Vehicle: 1995 Olds Aurora
VIN: 1G3GR62C5S4117799
Your File: PD-080400

Dear Greg:

Enclosed find the supporting subrogation documents, and expert report/ color photos per your request.

The vehicle is being held at an offsite location. Please call to schedule an appointment if you wish an inspection of the vehicle.

Sincerely,

Barbara Eilers
Claim Specialist

State Farm Insurance Companies



Auto Claim Central
2702 Ireland Grove Road
P. O. Box 2308
Bloomington, IL 61702
Fax 888-308-8000

June 5, 1999

[Redacted]
Lansing, IL [Redacted]

13-942-029 02

RE: Claim Number: [Redacted]
Insured: [Redacted]
Date of Loss: June 4, 1999

JUN 17 1999

Dear [Redacted]

Your Car Rental Coverage (R2) gives you a choice:

1. We will pay you 80% of the rental charge, subject to some limitations, when you rent a car from a car rental agency or garage while your car is not usable due to this loss. "Rental charge" means the daily rental rate plus charges for mileage and related taxes.
2. We will pay you \$10 a day, subject to some limitations, if you do not rent a car while your car is not usable due to this loss.

~~This coverage is subject to an aggregate limit of \$500 for any one occurrence. Please refer to your policy for a complete explanation of benefits.~~

Sincerely,

Heather Krung
Claim Processor
(888) 309-8637
44166
Team 16

State Farm Auto Insurance

24 days
= 240

COPY

PB

RENTALS

State Farm Insurance Companies



Head Office Center
11717 South Halsted Street
Chicago, Illinois 60628

August 5, 1999

Ford Motor Credit
2500 W. Higgins Rd, Ste 280
Hoffman Estates, IL 60195

RE: Claim Number: 12-9496-150
Insured: [REDACTED]
Date of Loss: [REDACTED]
Your Client: [REDACTED]
Account Number: [REDACTED]
Vehicle: Oldsmobile Aurora 1995

Dear Lienholder:

Enclosed is our draft for \$15424.59. Please send the lien-free title to State Farm.

Please call if there will be a delay of more than ten days.

Sincerely,

Cheryl Lohelt
Claim Representative
(773) 998-3316

State Farm Mutual Automobile Insurance Company

Enclosure: Return Envelope
Draft

COPY

State Farm Insurance Companies



Regional Service Center
11717 South Halsted Street
Chicago, Illinois 60658

August 9, 1999

[REDACTED]
Lansing, IL 60438-1463

RE: Claim Number: [REDACTED]
Insured: [REDACTED]
Date of Loss: June 4, 1999
Type of Vehicle: 1998 Oldsmobile

Dear [REDACTED]

Your recent total loss settlement breaks down as follows:

<u>ITEM</u>	<u>AMOUNT PAID</u>
Actual Cash Value	\$14756.00
Add Sales Tax	1143.59
Add Title Transfer	13.00
Add License Transfer	12.99
<hr/>	
SUB TOTAL	\$15424.59
Less Amount Due Lienholder	15424.59
BALANCE	\$0

Steno \$831.00 added to Total Loss

Sincerely,

Cheryl Leheit
Claim Representative
(773) 998-3316

State Farm Mutual Automobile Insurance Company

COPY

VEHICLE INSPECTION REPORT / TOTAL LOSS SETTLEMENT REPORT

Claim Number 13-0405-15901	Claim Representative Cheryl Lotell	Claim Unit
	Phone Number	FAX Number

Loss Code	Date of Loss 6/4/99	Date Reported
-----------	-------------------------------	---------------

Location Address IAA,	Phone Number	Towing	Storage Per Day
--------------------------------------	--------------	--------	-----------------

Cause of Loss
Comprehensive

VEHICLE DESCRIPTION

Vehicle Description 1995 Oldsmobile Aurora 4D Sed	License Plate Number	Expiration Date	State IL
---	----------------------	-----------------	--------------------

VIN 1G3GR62C6S4117759	Exterior Color PURPLE	Interior Color MAUVE
---------------------------------	---------------------------------	--------------------------------

Drive Train 4.9L Int 6 Cyl AO	Tires GOODYEAR P235/60R16	
---	-------------------------------------	--

Mileage 79,554	<input checked="" type="checkbox"/> Steel Bumper <input checked="" type="checkbox"/> Radial <input type="checkbox"/> VSW	% of Wear LF 80 LR 80 RP 80 RR 80 SP 0
--------------------------	--	---

EQUIPMENT / ACCESSORIES

DECOR / BODYSTYLE / TRIM	CONVENIENCE OPTIONS	POWER OPTIONS
4-Door	Alloy Wheels Air Conditioning Driver Side Air Bag Tilt Steering Wheel Cruise Control Defogger Rear Leather Seats Center Console Tilt Counter Passenger Side Air Bag Power Remote Mirror	Power Steering Power Brakes Power Windows Power Door Locks Power Seats Automatic Trans. Automatic Overdrive Anti-Lock Brake System Disc Brakes Front Wheel Drive
ROOF OPTIONS Electric Glass Roof		ELECTRONIC OPTIONS AM / FM Stereo Console Tape Player CD

JUN 17 1999

This report is complete as described. Equipment/Accessories listed above under list and describe additional Equipment/Accessories.
IAA CHARGES \$199.00

600

11756

Tax + 1173
 Fees + 25
 Actual Cash Value = 15924
 Owner Retained Salvage -
 Deductible - 600.00
 Lienholder Profit - 15424
 Amount Paid Owner @ 15424
 Date Settled 8/1/87

Ch. [Signature]

GLAM REP. SIGNATURE

Date Sold		Remarks:
Date Possession Received		1A9 9-0721
High Salvage Bid \$		
Towing Expense		Disposition of Title:
Storage Expense		
Miscellaneous Expense		
Net Salvage Return \$		Date:

STATE FARM INSURANCE
11717 S. HALSTED
CHICAGO, IL 60628
(773) 995-3300

Owner id: 02216 Valuation - Request: 24075381 06/18/1999 08:47 *INSTANT*

Adjuster name: CHERYL LOHEIT Loss date: 06/04/1999
Adjuster id: VIN: 1G3GR62C8S4117759
Claim reference: 13 9406 159
Insured: ADAMS Owner: [REDACTED]

VINguard		
Insurer Description		VINguard Analysis
Year	1995	1995
Make	OLDSMOBILE	OLDSMOBILE
Model	AURORA	AURORA
	GR6	GR6
Body style	4D SED	4D SED
Engine	8-4.0L-FI	8-4.0L-FI
Trans	AUTOMATIC TRANSMISSION OVERDRIVE	
Restraints	AIR BAGS (DRIVER+PASS.)	AIR BAGS (DRIVER+PASS.)
Odometer	79,554	Note: 19% higher than typical vehicle
This vehicle was assembled in		ORION, MI

VINguard message(s):
VINguard has decoded this VIN without any errors.

Vehicle Valuation Summary

DESCRIPTION	OPTION	LOCAL MARKET VALUE
Base value **		\$ 14,284.00
Odometer 79,554		- 859.00
Vehicle equipment:		
STD	AT - AUTOMATIC TRANSMISSION	INCLUDED
STD	OD - OVERDRIVE	INCLUDED
STD	TX - TRACTION CONTROL	INCLUDED
STD	SP - POWER DRIVER SEAT	INCLUDED
STD	PC - POWER PASSENGER SEAT	INCLUDED
STD	BS - BUCKET SEATS	INCLUDED
STD	RL - RECLINING/LOUNGE SEATS	INCLUDED
STD	LS - LEATHER SEATS	INCLUDED
STD	PS - POWER STEERING	INCLUDED
STD	TW - TILT WHEEL	INCLUDED
STD	PB - POWER BRAKES	INCLUDED
STD	DB - 4-WHEEL DISC BRAKES	INCLUDED
STD	AB - ANTI-LOCK BRAKES (4)	INCLUDED
	RG - ELECTRIC GLASS ROOF	+ 500.00
STD	TG - TINTED GLASS	INCLUDED
STD	RD - REAR DEFOGGER	INCLUDED
STD	PW - POWER WINDOWS	INCLUDED
STD	IW - INTERMITTENT WIPERS	INCLUDED
	AY - ALLOY WHEELS	+ 200.00
STD	AM - AM RADIO	INCLUDED
STD	FM - FM RADIO	INCLUDED
STD	ST - STEREO	INCLUDED
STD	CA - CASSETTE	INCLUDED
STD	CD - COMPACT DISC PLAYER	INCLUDED
STD	PA - POWER ANTENNA	INCLUDED
STD	PL - POWER LOCKS	INCLUDED
STD	PT - POWER TRUNK	INCLUDED
STD	AC - AIR CONDITIONING	INCLUDED
STD	CC - CRUISE CONTROL	INCLUDED
STD	AG - AIR BAG	INCLUDED
STD	RG - PASSENGER AIRBAG	INCLUDED
STD	CN - CONSOLE/STORAGE	INCLUDED
STD	DK - DIGITAL CLOCK	INCLUDED
STD	PM - POWER MIRRORS	INCLUDED
STD	BN - BODY SIDE MOLDINGS	INCLUDED
STD	TD - THEFT DETERRENT/ALARM	INCLUDED
STD	AL - AUTO LEVEL	INCLUDED
STD	DM - DUAL MIRRORS	INCLUDED
STD	FL - FOG LAMPS	INCLUDED
STD	KE - KEYLESS ENTRY	INCLUDED
STD	AW - ALUMINUM WHEELS	- 200.00
CCC Valuation Amount		\$ 13,925.00
Condition adjustment amount		+ 0.00

Vehicle Valuation Summary (continued)

Local Cash Value	<u>\$ 13,925.00</u>
Excise tax amount	<u>\$ 13,925.00</u>
Adjusted vehicle valuation amount	<u>\$ 18,925.00</u>

** The base value is the local market value of a vehicle of the same year, make, and model as the loss vehicle, including average mileage, and all standard (STD) and predominant (PREDOM) options. As such, the vehicle equipment listing reflects proper deductions for all standard or predominant option(s) which are not present on the loss vehicle. In cases where a standard or predominant option is superseded by a replacement or upgrade, a corresponding addition will appear for the option which supersedes the standard/predominant option.

Valuation Processing Notes

We have added the following standard options to the loss vehicle: Anti-lock Brakes (4), Air Bag, Console/storage, Digital Clock, Dual Mirrors, Fog Lamps, Keyless Entry, Power Antenna, Passenger Airbag, Theft Deterrent/alarm, Traction Control

Your valuation has been prepared in compliance with Section 918.80(2)(B) of the Illinois Administrative Code, governing computerized surveys.

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Trade names and/or trademarks used herein are owned by their respective trademark owners.

Date: 01/08/10 10:00 AM
 Estimate No: 10-000-1000
 Company: S
 Product: MIA/PCF

State Farm Insurance

2000 E. Chary Ave. Moline, IL 61401
 (708) 636-0000
 Fax: (708) 636-0040

FOR ANY QUESTIONS REGARDING THIS ESTIMATE PLEASE CONTACT THE INDICATED CLAIMS REPRESENTATIVE.

Damage Assessed By: JEFFREY KALTH

Claim Rep: Cheryl Lohat
 (708) 636-2846

Final Loss Estimate

Type of Loss: Comprehensive
 Date of Loss: 07-08-09
 Deductible: \$0000
 Claim Number: [REDACTED]

Insured Address: [REDACTED] LANSING, IL [REDACTED]
 Telephone: Work Phone: [REDACTED] Home Phone: [REDACTED]

Model Series: 0Y0-00

Description: 1998 Oldsmobile Alero
 Body Style: 4D Sed
 VEC: 1000000000411700
 VIN: 7G004
 COUNTRY: A
 Color: PURPLE
 Options: ALLOY WHEELS, AIR CONDITIONING, POWER STEERING, POWER BRACES, POWER WINDOWS, POWER DOOR LOCKS, POWER SEATS, PASSENGER SIDE AIR BAG, TILT STEERING WHEEL, CRUISE CONTROL, DEPENDENT REARVIEW MIRROR, INTERLOCK BRAKE SYSTEM, LEATHER SEATS, AUTOMATIC TRANS, AUTOMATIC OVERDRIVE, CENTER CONSOLE, TRIP COUNTER, PASSENGER SIDE AIR BAG, POWER REMOTE MIRROR, ANTI-LOCK BRAKE SYSTEM, DISC BRAKES, FRONT WHEEL DRIVE, SINGLE EXHAUST, POWER ANTENNA, V-6 ENGINE, ELECTRIC GLASS ROOF, 4-DOOR, FUEL INJECTION

Drive Train: [REDACTED]
 License: [REDACTED]
 Search Code: METRO

Line	Entry	Label	Code	Line Item	Description	Unit	Rate	Dollar	Label
Seq	Number	Type	Category	Description		Code		Amount	Units
1	00000	BDY	ADJL LABOR CP	TOTAL LOSS					GP
2				HEAVY ENGINE COMPARTMENT BURN					GP

* - Judgment Item

NOTIFIED
~~STATE FARM~~
 VEHICLE
 IS
 TO

ESTIMATE RECALL NUMBER: 01/08/10 10:00 AM (10-000-1000)

Moline, IL is a trademark of Mutual International
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 All Rights Reserved

Model Code Vendor:

Date: 07/20/10 10:00 AM
 Estimate No: 10438-1001
 Customer: 0
 Page 1 of 2: M&L PCP

I. Labor Estimate	Units	Rate	Adj'd Labor Amount	Subst Amount	Total	II. Part Replacement Summary	Amount
Labor Summary	00				0.00	Total Replacement Parts Amount	0.00
III. Additional Costs					Amount	IV. Adjustments	
Total Additional Costs					0.00	Insurance Deductible	0.00
						Subtotal of Adjustments Expense Gross Total	0.00
						Customer Responsibility	0.00
						I. Total Labor	0.00
						II. Total Replacement Parts	0.00
						III. Total Additional Costs	0.00
						Gross Total	0.00
						IV. Total Adjustments	0.00
						Net Total	0.00

Inspection Dept: JAA
 Inspection Dept: 07/20/10

Body Shop: JAA

NOTICE: REPAIRS TO THIS VEHICLE MAY REQUIRE SPECIFIC WELDING EQUIPMENT AS RECOMMENDED BY THE MANUFACTURER.

ILLINOIS LAW REQUIRES THAT VEHICLE REPAIRERS MUST BE LICENSED IN ACCORDANCE WITH SECTION 5-361 OF THE ILLINOIS VEHICLE CODE.

THIS IS NOT AN AUTHORIZATION TO REPAIR. ALL SUPPLEMENTS REQUIRE PRIOR APPROVAL BY A STATE FARM CLAIM REPRESENTATIVE.

SHOP AGREES WITH THIS ESTIMATE

CLAIM NO 13-8405-150

POLICY NO H112-0405-13

LOSS DATE 6/04/1989

PAYMENT NO 1 01 893150 J

DATE 7/28/1989

AMOUNT \$135.00

TIN 13-862881673

COMPREHENSIVE - PNT, CAC, OR LOW 935.00 311 2

ENTERED BY MEBAIN, TONYA
AUTHORIZED BY LOHEIT, CHERYL
PHONE (773) 896-3816

REMARKS FOR TOWING



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

ILLINOIS OFFICE
BLOOMINGTON, IL
BRANDED 01-141 LOS

BANK ONE NO 56-1544/441
CINCINNATI, OH

1 01 893150 J
7/28/1989

CLAIM NO

LOSS DATE 6/04/1989

*****EXACTLY ONE HUNDRED THIRTY-FIVE AND 00/100 DOLLARS

Pay to the
Order of BOB'S AUTOCRAFT INC ON BEHALF OF BEVERLY A. ADAMS
18510 S CRAWFORD
TINLEY PARK IL 60478-2000

APPROVED BY

DATE 01/24/1988

AMOUNT \$240.00

TIN

0000.00 501 1

ENTERED BY ROLIAK, STACEY
AUTHORIZED BY LOHET, CHERYL
PHONE (773) 885-3318

REVENUE



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

CLAIMS OFFICE
BLOOMINGTON, IL
INLISTED 01-141 LISA

COMMERCIAL BANK 78-106/711
BLOOMINGTON, IL

1 01 890787 J
01/24/1988

ADAMS, BEVERLY

CLAIM NO 13-8406-159

LOSS DATE 01/04/1988

*****EXACTLY TWO HUNDRED FORTY AND 00/100 DOLLARS*****

Pay to the
Order of

STATE FARM MUTUAL
LANSING IL 3

APPROVED BY

Coverage Description	Amount	COI	Pay Cd
COMPREHENSIVE - FW, CAC, OR LOW	615,424.59	311	1

DATE 8/05/1989
 AMOUNT \$15,424.59
 TIR

ENTERED BY ROLNIAK, STACEY
 AUTHORIZED BY LOHEIT, CHERYL
 PHONE (773) 986-3318

ACCT #APA9862K34



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

ILLINOIS OFFICE
 BLOOMINGTON, IL
 BLDG 01-141 1083

MARK ONE NA 56-1544/441
 CINCINNATI, OH

1 01 893924 J
 8/05/1989

[REDACTED]

CLAIM NO [REDACTED]

LOSS DATE 8/04/1989

EXACTLY FIFTEEN THOUSAND FOUR HUNDRED TWENTY-FOUR AND 59/100 DOLLARS [REDACTED]

Pay to the Order of FORD MOTOR CREDIT COMPANY INSURANCE SERVICE CENTER ON BEHALF OF

[REDACTED]
 HOFFMAN ESTATES II [REDACTED]

APPROVED BY

CLAIM NO 13-9408-100

POLICY NO R112-500-13

LOSS DATE 6/04/1999

PAYMENT NO 1 01 894898 J

DATE 8/17/1999

AMOUNT 6140.00

TRK 13-963780111

COMPREHENSIVE - FW, CAC, OR LOW 8140.00 311 3

AUTHORIZED BY LOHEIT, CHERYL
PHONE (773) 895-3316

ISSUES Invoice 98861



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

ILLINOIS OFFICE
BLOOMINGTON, IL
BLMTRD 01-141 L006

BANK ONE NA 56-1544/441
CINCINNATI, OH

1 01 894898 J
8/17/1999

CLAIM NO [REDACTED]

LOSS DATE 6/04/1999

*****EXACTLY ONE HUNDRED FORTY AND 00/100 DOLLARS*****

[REDACTED]

Pay to the
Order of INSURANCE AUTO AUCTION
110 E PALATINE ROAD
WHEELING IL 60090-6528

APPROVED BY

773-5111

DELIVERY NEEDED
PLEASE REMIT PAYMENT TO:

Control No. 8667

Date: 11/24/1960
Invoice: 118408

COMPREHENSIVE INSURANCE SERVICE
1700 WEST 16TH STREET
BROADVIEW, IL 60153
(708) 345-8700 - (800) 345-8700

Raid Installation
Account

C.I.S.

INSTALLATION LOCATION

95 OLDS AURORA
LICENSE:
V.I.N. 1

STATE FARM INSURANCE
Claim

LANSDING, IL
Contact: HICK

Product Code	Description	Quantity	Notes
ROCRFB1225A	25X2, 45X1, COVER	1.00	425
ROCRFB1045A	PUNCH 45.2 AMP	1.00	212.50
STIS1EC4	12" SOLGARIC SUB 4 OHM	8.00	250.00
STIS1EC8	12" SOLGARIC SUB 8 OHM	1.00	75
LABOR	SUB ENCLOSURE	1.00	
LABOR		5.00	
PARTS	WIRE/CONNECTORS/SUPPLIES	1.00	
PNDA321	1 METER RCA CABLE	1.00	
PNDA432	RCA Y-CABLE M-2F	1.00	
PNDA433	RCA Y-CABLE F-2H	2.00	
PNDA918	15' RCA CABLE	1.00	

1662.50
127.84
1790.34

CSR: HOUSE PLEASE PAY THIS AMOUNT --) GOD Insured 1 8.00

The undersigned agrees that all equipment repaired is correct and the repairs have been completed to a satisfactory manner, and authorizes the above claim to be paid. I also authorized C.I.S. to order any necessary parts or equipment to complete the claim. I also give Power of Attorney to C.I.S. Comprehensive Insurance Service, giving C.I.S. authorization to sign and deposit my insurance company's check in relation to my claim while under repair. I am responsible to pay C.I.S. for any deductible or settlement due on this claim. I will also notify C.I.S. and my C.I.S. my money paid directly to me from my insurance company that were used to pay any or all of the claim. In the event it is necessary for C.I.S. to institute legal action for the collection of money due from me regarding this claim, I agree to pay a reasonable attorney's fee in addition to all costs of suit incurred.

Insured Signature: _____ Technician Signature: _____

All product is covered by the manufacturer's warranty for the original purchaser or unless otherwise indicated.

Please keep this invoice for proof of purchase. I accept the original invoice. Please sign.

All sales are final. No cash returns. My company returns will be for credit only.

121216 - Superior Delivery Systems, Inc. Falls Church, VA

I HAVE REVIEWED AND AGREE WITH THIS ESTIMATE

STATE FARM INSURANCE
955 WEST 175TH STREET BOWLING GREEN, IL 60430-2004
(309) 937-6200

FOR ANY QUESTIONS REGARDING THIS ESTIMATE PLEASE CONTACT THE INDICATED CLAIMS REPRESENTATIVE.
THIS IS NOT AN AUTHORIZATION TO REPAIR. OWNER PAYS TOTAL REPAIR COSTS.

Damage Assessed By: BOB STUMP

Appraised For: Tanya Warner
(773) 995-3519

Supplemented By: RICK DEWOLDS

Type of Loss: COLLISION
Date of Loss: 05/02/78
 deductible: 0.00
Claim Number: [REDACTED]

Insured: [REDACTED]
Address: [REDACTED] LAKEWOOD, IL [REDACTED]

Telephone: Work Phone: [REDACTED] Home Phone: [REDACTED]

Nichell Service: 910493

Description: 1978 Oldsmobile Aurora

Body Style: 4D Sed

Drive Train: 4.0L Inj 8 Cyl 40

VIN: 1G8040000417759

License: [REDACTED]

Mileage: 32,000

CR/PLT: A

Search Code: METRO

Options: AIR CONDITIONING, POWER STEERING, POWER BRACES, POWER WINDOW, POWER DOOR LOCK, STEREO RADIO, CASSETTE, AUTOMATIC TRANSMISSION, FRONT WHEEL DRIVE, V-8 ENGINE, 6-DOOR, FUEL INJECTION.

Line	Entry	Labor	Line Item	Part Type/	Dollar	Labor	
Item	Number	Type	Description	Part Number	Amount	Units	
01	1	900000	FRN	FRONT/REAR/STAY KAMPID AND SETUP	184.00		
2	AUTO	REY	GENERAL	PTT COVER ADPT		1.9	
01	3	000025	RDY	REMOVAL/REPLACE	REAR BUMPER COVER	246.00 INCL #	
4	AUTO	REY	REPAIR	PTT BUMPER COVER		C 2.1	
5	000024	RDY	REMOVAL/REPLACE	RTT LAR BUMPER RAFFLE	2000021	RTT-PAR 10.85 INCL	
6	000025	RDY	REMOVAL/REPLACE	PTT BUMPER LICENSE BRACKET	2000021	RTT-PAR 14.25 INCL	
01	7	000040	RDY	REMOVAL/REPLACE	PTT BUMPER REINFORCEMENT	2000042	RTT-PAR 497.00 INCL
8	000023	RDY	REMOVAL/REPLACE	L R/LAMP ASSEMBLY	*SMALL REPL PART	224.00 2.2 #	
9	AUTO	RDY	CONVERSION	REPLACEMENT		0.3	
10	000079	RDY	REMOVAL/REPLACE	L CONVERSION/RTT LAMP ASSEMBLY	2000023	RTT-PAR 76.26 INCL #	
11	000100	RDY	REMOVAL/REPLACE	REAR PANEL	2000023	RTT-PAR 206.00 1.3	
12	AUTO	REY	REPAIR	REAR OUTSIDE		C 2.5	
13	AUTO	REY	REPAIR	REAR UNDERSEAL		B 1.4	
01	14	000025	RDY	REMOVAL/REPLACE	REAR BUMPER COVER	246.00 2.2 #	
15	000025	RDY	REMOVAL/REPLACE	R REAR BUMPER COVER		C 0.9	

ESTIMATE RECALL NUMBER: 05/12/78 12:15:27 13-9000-78001

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Nichell Data Verifier: MAY_26_A

Page 1 of 4

00065	BOY	REPAIR	R FENDER PANEL	Existing			1.5*
17	00064	BOY	REMOVE/REPLACE	L FENDER PANEL	25644702	DR PAR	381.00 0.3 B
18	AUTO	REF	REFINISH	L FENDER OUTSIDE			C 1.8
19	AUTO	REF	REFINISH	L FENDER QUARTER			C 0.5
01 20	00069	BOY	REMOVE/REPLACE	L FENDER LINER	25639161	DR PAR	39.50 INCL
01 21	00068	BOY	REPAIR	L FRONT BODY UNDOORING PANEL	Existing		1.5*
22	AUTO	REF	REFINISH	L RTY FENDER LOWER/INNER			1.0
23	00066	REF	BLEND	L RTY QUARTER OUTSIDE			C 0.8
01 24	00167	REF	BLEND	R QUARTER PANEL OUTSIDE			C 0.8
01 25	00168	BOY	REPAIR	R QUARTER OUTER PANEL	Existing		2.0*
01 26	00163	REF	BLEND	REAR BUMPER COVER			C 1.0
01 27	00144	BOY	REPAIR	REAR BUMPER COVER	Existing		1.5*
01 28	93161	PCR	ADD'L LABOR OF	AC REFRIG	Sublet		54.00* 0.0*
01 29	90080	PCR	REPAIR/REPLACE ITEMS UNRELATED TO AIR LOCK	Existing			0.0*
01 30			REPAIR/REPLACE ITEMS UNRELATED TO AIR LOCK				
01 31	93600		ADD'L COST	FRESH & OIL			12.00*
32	93601		ADD'L COST	TONING			129.60*
33	AUTO	REF	ADD'L CDR	CLEAR COAT			3.0
34	AUTO		ADD'L COST	PAINT/MATERIALS			275.40*

- * - Judgment Item
- B - Labor Note Applies
- ***** SPECIAL REPL PART: Quality Replacement Parts
- C - Included in Clear Cost Calc

ACTIVITY
 205 PENCIL LANE
 [REDACTED]
 (708) 225-2019 (708) 449-7276

2 1997 224.00

CALL FOR CDR. SUPPL. FOR STAMP 05-12-98
 REPAIRS RE STAMP 4/15/98 AT HAMMERTY OLD, BRINE LAMP CR.
 REPAIRS WITH PMA. HAS MAINTENANCE PROBLEMS.
 OIL LEAKS FROM BELT DRIVE PUMP. CRACKS REAR LAM. ENGINE AREA.
 OIL FUEL INJECTOR PROBLEM UNRELATED MAINTENANCE.
 OIL CALLER FROM SHOP.
 NOT PART OF 100. LOW MAINTENANCE.

ESTIMATE RECALL NUMBER: 06/13/98 12:15:27 13-9000-7001

Mitchell Data Version: MAY_98_A

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Page 2 of 4

I. Labor Subtotals	Units	Rate	Add'l		Totals
			Labor	Subject	
Body	12.4	34.00	0.00	0.00	425.40
Refinish	14.2	34.00	0.00	0.00	482.80
Frame	0.0	98.00	0.00	184.00	184.00
Mechanical	1.5	49.00	0.00	56.00	123.50

Non-Taxable Labor 1,286.70

Labor Summary 38.3 1,286.70

III. Additional Costs	Amount
Taxable Costs	412.40
Sales Tax @ 8.250%	34.02
Total Additional Costs	446.42

II. Part Replacement Summary	Amount
Taxable Parts	2,364.48
Sales Tax @ 8.250%	196.81
Total Replacement Parts Amount	2,451.21

IV. Adjustments	Amount
Insurance Deductible	0.00
Customer Responsibility	0.00

I. Total Labor:	1,286.70
II. Total Replacement Parts:	2,451.21
III. Total Additional Costs:	446.42
Gross Total:	4,184.33

IV. Total Adjustments:	0.00
Net Total:	4,184.33
Less Original Net Total:	2,647.97
Net Supplement Amount:	1,536.36

01: BOB STUMP	1,536.36
02: MIKE REYNOLDS	0.00

Location of Impact
 T1 LEFT FRONT CORNER (P)

Inspection Site: ALS AUTO
 Inspection Date: 05/13/98

Body Shop: ALS AUTO BODY
 Address: 14851 BRIDGEWOOD AVE
 DOLTON, IL 60419
 Telephone: (708) 331-3700
 Fax Phone: (708) 331-3317
 State Lic. No: 36-3900286

ESTIMATE SERIAL NUMBER: 05/13/98 13:15:27 13-9008-78301

Mitchell Data Version: MAY_98_A

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THIS IS NOT AN AUTHORIZATION TO REPAIR.

ALL SUPPLEMENTS REQUIRE PRIOR APPROVAL
BY A STATE FARM CLAIM REPRESENTATIVE.

NOTICE: REPAIRS TO THIS VEHICLE MAY REQUIRE SPECIFIC WELDING
EQUIPMENT AS RECOMMENDED BY THE MANUFACTURER.

ILLINOIS LAW REQUIRES THAT VEHICLE REPAIRERS MUST
BE LICENSED IN ACCORDANCE WITH SECTION 5-301 OF
THE ILLINOIS VEHICLE CODE.

ESTIMATE RECALL NUMBER: 05/13/98 12:15:27 13-9009-70301

Mitchell Data Version: MAY_98_A

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11, 2000

IN RE: State Farm Claim No. 13-9406-159
HGA File No. 00-0833VF

[REDACTED]

**HERNDON
ASSOCIATES**

Investigators/Consultants

588 East Larned, Suite 100
Detroit, Michigan 48226-4316
PH:313 964-0236

1-800-941-2709
www.herdon-associates.com
hga@herdon-associates.com

P.O. Box 27
Livonia City, Michigan 48150
PH: 313-964-0242

Licensed in Michigan,
Ohio, Illinois

PREDICATION:

This report is predicated upon the request of Mr. John Kessler, State Farm Investigator (Special Investigation Program), to conduct an investigation into [REDACTED] with special reference to the fire loss of a 1995 Oldsmobile, Aurora.

INSPECTION:

On April 25, 2000 at 9:00 a.m., Investigators Walt Herndon and Devin Jordan arrived at Insurance Auto Auction in Markham, Illinois to conduct an investigation into the fire loss of a 1995 Oldsmobile, Aurora.

Once at the scene, a close inspection provided the following information:

SEE ENCLOSED INVESTIGATION REPORT

Prior to leaving the scene, several 35mm color photographs were taken and are enclosed.

ORIGIN AND CAUSE INVESTIGATION:

On April 25, 2000 at 9:00 a.m., Investigators Walt Herndon and Devin Jordan arrived at Insurance Auto Auction in Markham, Illinois to conduct an origin and cause investigation into the fire loss of a 1995 Oldsmobile, Aurora, dark gray in color, Vehicle Identification Number 1G3GR52C394117759. Upon arriving at the facility, the

IN RE: State Farm Claim No. 13-9406-159
HSA File No. 00-0833VF
[REDACTED]

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Page 3.

At this time, the examination is focused to the fluid levels where the brake fluid has drained during the course of the fire, radiator drained during the course of the fire, oil is full, and transmission fluid does not register on the transmission fluid dipstick, etc.

The examination is focused to the valve covers where there is no evidence of oil leakage that could be attributed to the cause of the fire. The examination is now focused to the transmission cooler hoses which are intact, and there is no evidence of any fluid leakage.

The investigation is now focused to the fuel rail and combustible fuel lines and it is determined that they have been consumed during the course of the fire. The investigation further reveals the most severe damage present is in the area where the fuel lines point to the center of the engine, with the damage extending rearward and outward on the left or driver's side.

The investigation is now focused to the electrical within the engine compartment where there is evidence of exposure fire damage to wiring, however, no evidence of any electrical faulting.

At this time, after completing the above inspection and examination, it is the opinion of both investigators that the fire was accidental in nature. It is further the opinion of both investigators that the fire originated in the area of the engine compartment where the fuel lines are located directly above the brake booster. The fire extended upward and outward from that location. The fire is deemed to be an accidental fire.

NICO VINASSIST:

A review of the NICO Vinassist indicates that the 1995 Oldsmobile, Aurora, is equipped with a 4.0 liter V-8 engine, and was assembled in Orion, Michigan.

IN RE: State Farm Claim No. 13-9406-159
H&A File No. 00-0833VE
[REDACTED]

May 11, 2000
Page 4.

NATIONAL HIGHWAY TRAFFIC & SAFETY ADMINISTRATION:

A search of the National Highway Traffic & Safety Administration, Recall Database, produced one record pertaining to the vehicle in question. Upon reviewing same, it was found not to pertain to the fire in question.

A further search was conducted of the National Highway Traffic & Safety Administration, Investigations Database, which produced two records pertaining to the vehicle in question. Upon reviewing same, neither were found to pertain to the fire in question.

ALIDATA SYSTEM:

A search of the Alidata System produced a number of technical service bulletins pertaining to the vehicle in question. Upon reviewing same, none were found to pertain to the fire in question.

AUTOMOBILE CLAIM SERVICE RECORD:

A review of the Automobile Claim Service Record indicates Claim Number [REDACTED]. The names insured is listed as [REDACTED] Lansing, Michigan. The date of loss is listed as June 4, 1999. The principal damage is listed as hood, etc.

RESUTOCK ENGINEERING:

[REDACTED]
[REDACTED] of Chicago, Illinois. Michael Resutock, Professional Engineer, was of the opinion that a failure of one of the pressurized fuel lines, located in the engine compartment, and subsequent ignition of the leaking gasoline was the cause after coming in contact with the exhaust manifold.

OTHER INTERVIEW:

On April 13, 2000 at 3:15 p.m., Lisa Rodrigues, a State Farm employee, secured an interview from Pierre Adams, who is one of

PRIVILEGED MATERIAL REDACTED

IN RE: State Farm Claim No. 13-9406-159
H&A File No. 00-0833VF
[REDACTED]

May 11, 2000
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the titleholders and principal operator of the vehicle in question. The vehicle is insured by [REDACTED], who is his mother. Further questioning revealed that no one else operates the vehicle other than the insured's son. [REDACTED]

[REDACTED] and the weather conditions were nice. The location of the fire was the 1500 block of E. 87th Street, Chicago, Illinois. Subsequently, unidentified parties contacted 911 and the fire department responded quickly and extinguished a fire involving the 1995 Oldsmobile. Aurora. [REDACTED]

[REDACTED] The driver went on to state that the tank was approximately half full at the time of the fire and that Oil Express in Chicago normally checks the fluid levels.

When questioned regarding who the last person was to have entered the engine compartment and for what reason, [REDACTED]

Oil changes are secured every 3,000 miles and in between oil changes, they do not have to add oil or any other fluids.

When questioned regarding any mechanical or electrical problems with the vehicle prior to the fire, the driver stated the anti-lock brakes, acceleration, overheating, anti-freeze leak, and that [REDACTED]. When questioned regarding whether the items were taken care of, she indicated that Curzie Motors and Oldsmobile repaired same.

[REDACTED] mileage at the time of the fire loss was 70,000 miles.

Since ownership of the vehicle, the insured has not received any recall notices, campaigns, or correspondence from the manufacturer. Further, [REDACTED] and no one was smoking in the vehicle prior to the fire.

When questioned regarding any accessories being added to the vehicle since the purchase, [REDACTED] been added and that it had been [REDACTED]

PRIVILEGED MATERIAL REDACTED

May 11, 2000
Page 6.

Since ownership of the vehicle, it was involved in an accident in 1997 or 1998, the front end, and all the work performed at Sears. At the time of the fire, the vehicle had been driven approximately a half a block, no accessories were being utilized, however, all accessories functioned. Just prior to the fire, the insured did not observe any fluid leaks, experience any operability problems, there were no warning lights illuminated or any changes in the gauges. When questioned regarding detecting any odors, Pierre indicated he detected a little gas and that he had put gas in the vehicle that day. Further questioning revealed he did not hear any noises prior to the fire.

In a short scenario, the insured stated that he drove to Sears and everything was fine. He came out, drove the vehicle half a block, pulled over, and turned off the vehicle because of smoke emanating from the hood. The insured went in to Sears to get a fire extinguisher, however, he could not put the fire out as there were huge flames. The firemen subsequently arrived and extinguished the fire. The smoke was first observed under the hood, was gray and white in color, the flames were huge, and no color was given. The hood was closed at the time of the fire, all windows were up, and all doors were closed.

Further questioning revealed that Sears may have photographed the fire as they have a security guard and video camera in the area. In conclusion, the insured states the firemen did not indicate any probable cause regarding the fire and the insured has no idea as to the cause of the fire.

CONCLUSION:

Having completed an examination of the vehicle, reviewed an interview with the insured, conducted research pertaining to the vehicle in question, and based upon all of the information known at the time of the preparation of this report, it is the opinion of both Investigators that the fire was accidental in nature. It is further the opinion of both Investigators that the fire was caused by the leakage of fuel vapors in the area of the fuel line connections. The fire is deemed to be an accidental fire due to the leakage of fuel vapors in the area of the fuel line connections.

SEP 13 1999

Ms. Cheryl Lohet
State Farm Insurance Co.
11717 South Halstead
Chicago, IL 60628

Re: Vehicle Fire Cause & Origin
Chicago, IL
Your Insured [REDACTED]
Your File # [REDACTED]
Rzesutoek Engineering Project No.: IL990809A

Dear Ms. Lohet:

At your request, on August 18 and 19, 1999, I visited Insurance Auto Auctions, in Markham, Illinois, and examined a 1995 Oldsmobile Aurora which had been involved in a fire on June 4, 1999. You requested that I offer an opinion in regards to the cause and origin of the fire.

Reportedly, the fire occurred at a financial bank located on the 1500 block of East 87th Street in Chicago, Illinois. The driver of the vehicle reported that he saw the fire as he was driving away from the bank. [REDACTED]

Figures 1 through 5 are general views of the Aurora four door sedan. The VIN was 1G3GR62C584117759 and the Illinois license plate was 43888PV. The odometer had recorded 79,554 miles. The interior of the Aurora had not sustained any burn damage. All components of the interior were present and no interior components had sustained any damage consistent with vandalism. [REDACTED]

A white powder, consistent with the use of a dry fire extinguisher, was located on most of the horizontal surfaces of the interior. The battery was located at a position beneath the passenger side of the rear seat.



Rzesutoek Engineering
Forensic Motor Vehicle Engineering

1241 West Fullerton • Suite 151 • Chicago, Illinois 60641 • Phone: (773) 334-2241

The exterior of the Aurora did not feature any collision damage. Items which were missing from the exterior included the antennae and all four wheel hub covers. All tires matched, were inflated and had not sustained any burn damage. All window glass was intact. The glass of the windshield had sustained a crack consistent with heat exposure resulting from the engine compartment fire. The truck could not be opened but it did not appear to have sustained any internal burn damage.

No burn damage was observed on the underside of the Aurora. The fuel lines, fuel tank and exhaust system was intact and undamaged. The fuel vapor canister was located at the driver side rear corner of the vehicle and had not sustained any burn damage.

The Aurora featured a 4.0 liter transverse mounted V-8 engine with multi-point fuel injection, a 3 speed automatic transaxle with overdrive, power assisted rack and pinion steering, and power assisted brakes. The engine compartment and the adjacent hood (see Figure 7) had sustained significant and direct burn damage. The outline of the burn damage sustained by the hood was marked on the top of the engine compartment components with orange paint. The arrows added to Figure 8 point out the outline of the oval shaped hole in the hood superimposed on the top of the engine. The burn damage sustained by the engine and associated components was limited to the upper elevations of the engine compartment. No burn damage was observed at the bottom or side levels of engine compartment. Based on a examination of the burn damage, the most intense area of the fire in the engine occurred at the middle of the oval shaped burn pattern.

The engine compartment of a similar 1995 Aurora (VIN 1G3GR62G694126101) with 4.0 liter engine is shown in Figure 9. In this photograph, the arrow labeled "A" points out the three fuel lines, the translucent plastic brake fluid reservoir and the round power brake vacuum booster (located below the fuel lines and behind the reservoir). The arrow labeled "B" points out the four ignition coils. The large square object located above the ignition coils is the vacuum reservoir and a series of three relays, mounted on the bulkhead, are visible at a location between the coils and the reservoir. The square object located between the vacuum reservoir and the brake vacuum booster is an electrical connector. The silver plastic intake manifold cover is pointed out by arrow "C".

Figure 10 is a view of several engine components of the Aurora which had sustained burn damage. In this photograph, arrow "A" points out the location of the connection between the metal and plastic fuel lines. These fuel lines consisted of the high pressure inlet line, the lower pressure return line and the vapor line from the vapor canister. Arrow "B" points out the location of the brake fluid reservoir which had been consumed by the fire. Arrow "C" points out the location of the ignition coils. The coils were covered with the melted and slumped material of the vacuum reservoir. The bank of relays and the electrical connectors are visible at a position to the rear of the coils on the bulkhead. Figure 11 is a closer view of the components which were located at the driver side rear corner of the engine compartment and which had sustained burn damage. Arrow "A" points out the metal fuel lines, arrow "B" points out the EGR valve and arrow "C" points

out the fuel vapor solenoid valve which controls the introduction of the gasoline vapors from the fuel vapor canister into the intake manifold.

As previously stated, the engine components located beneath the middle of the oval shaped hole in the hood had sustained the most significant burn damage and exhibited the most intense burn patterns. A diminishing level of burn damage was observed as the distance from the center of the oval increased. Components in the center of the oval burn pattern included the fuel lines, the brake fluid reservoir, the fuel vapor lines, the EGR valve and several wire bundles. The conductors of the wire bundles did not exhibit any beads or melted and re-solidified copper which is consistent with a short circuit. In my opinion, the inlet and outlet fuel lines are the components which, in the event of a failure, would be most likely to start and sustain a fire. Both fuel lines contain pressurized gasoline and a failure of either would allow fuel to be sprayed into the engine compartment. Any leaking fuel could then be ignited by either the exhaust manifold, which was located at the rear of the engine compartment beneath the ignition coils, or by the ignition system components such as the ignition coils or the spark plug wires.

Arguments may be presented that neither the exhaust manifold nor the ignition system were a likely source of ignition. For example, if the exhaust manifold was the source of ignition then it would be reasonable to expect some burn damage proximate to the exhaust manifold at the lower levels of the engine compartment. This was not observed. Similarly, the normal operation of the ignition system would most likely not cause a fire even if the components were sprayed with gasoline. First, ignition coils do not operate at a particularly high temperature and second, when operating properly, they do not generate exposed electrical arcs. Malfunctions of the ignition system may create either of these conditions. However, these malfunctions would also cause the engine to operate in a very rough manner. Since no operating problems were reported by the driver, in my opinion, it is unlikely that the ignition system was malfunctioning. In my opinion, the exhaust manifold would be the most likely ignition source because it would not require the failure of two independent systems (e.g. the fuel system and the ignition system).

A search of the NHTSA website did not result in any recalls or technical service bulletins which were applicable to the circumstances of this incident.

Based on the foregoing observations and analysis



At your request, this letter is being sent in order to summarize my findings. If you should have any questions, please feel free to contact me. I appreciate the opportunity to have been of service to you.

Sincerely,

Michael P. Rosstock

Michael P. Rosstock
Professional Engineer
State of Illinois
Registration 0062-051567

enclosures

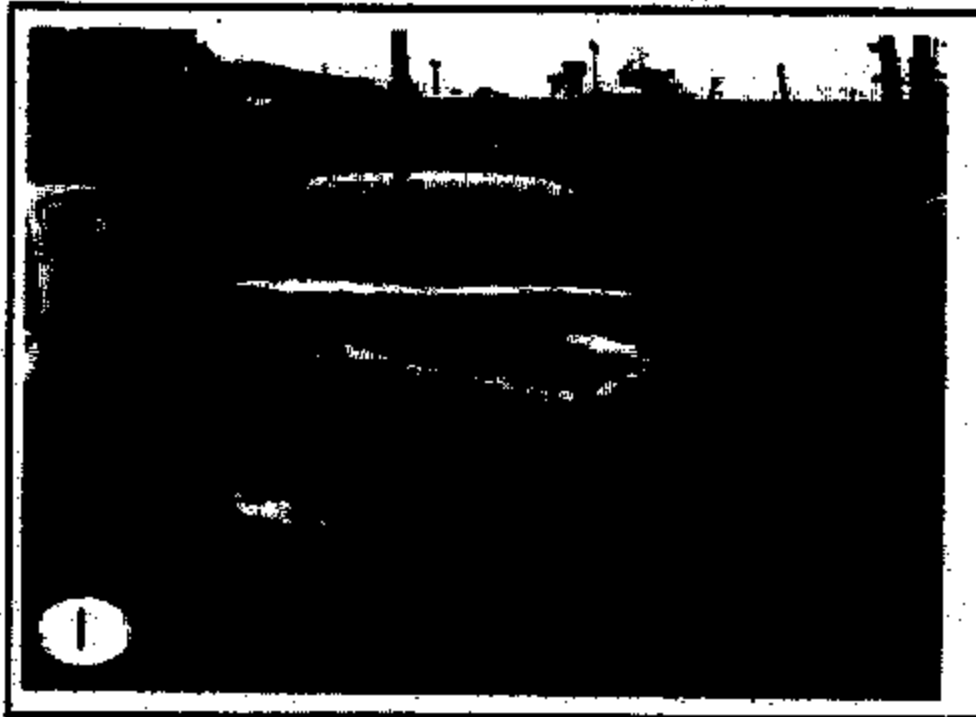


Figure 1. Front View of Aurora

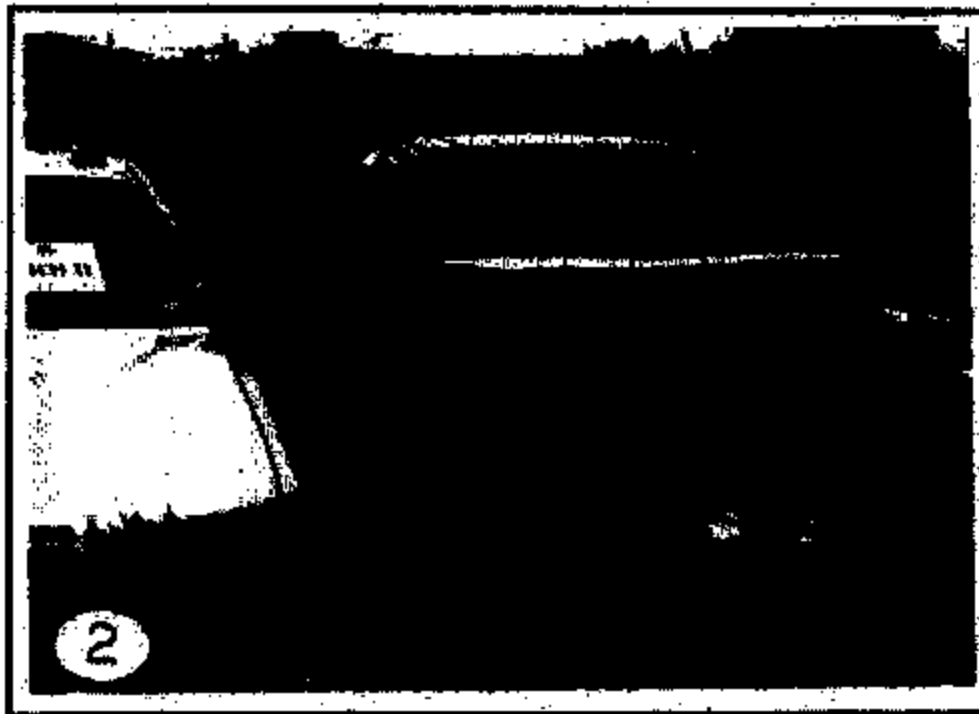


Figure 2. Passenger Side Front View of Aurora



Figure 3. Passenger Side Rear View of Aurora

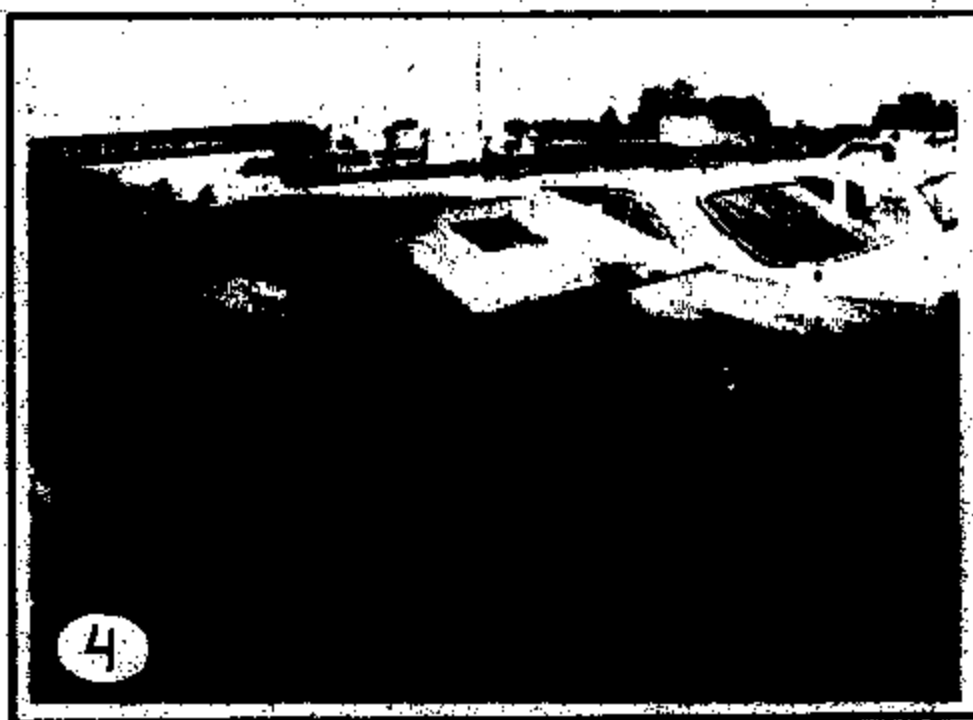


Figure 4. Driver Side Rear View of Aurora



Figure 5. Driver Side Front View of Aurora

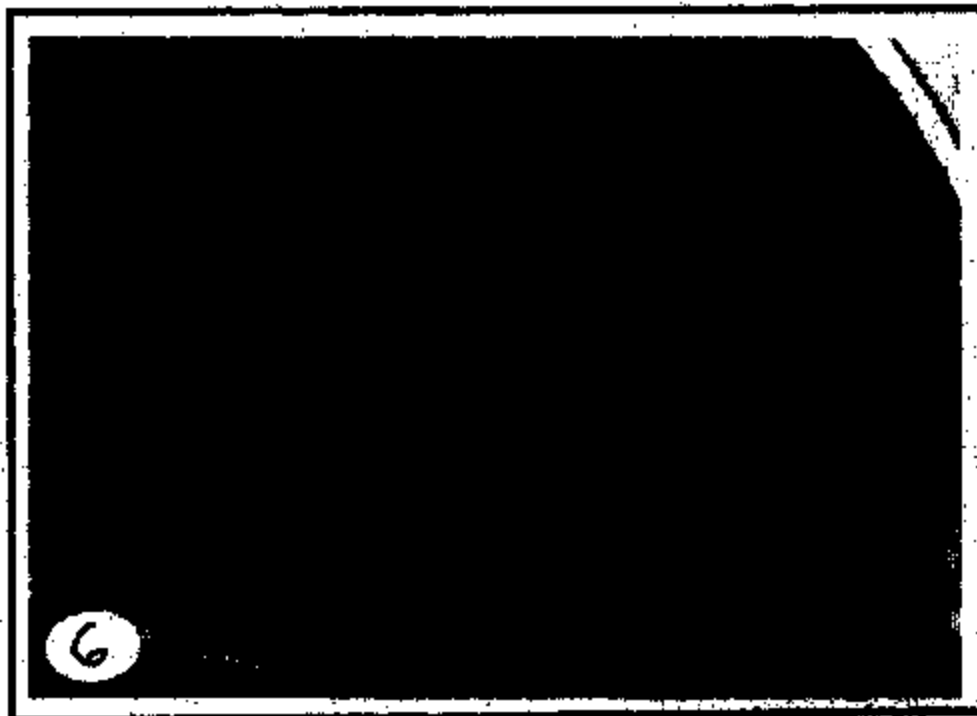


Figure 6. View of Plastic Gasoline Can located on Rear Seat



Figure 7. Top View of Burn Damage Sustained by Hood

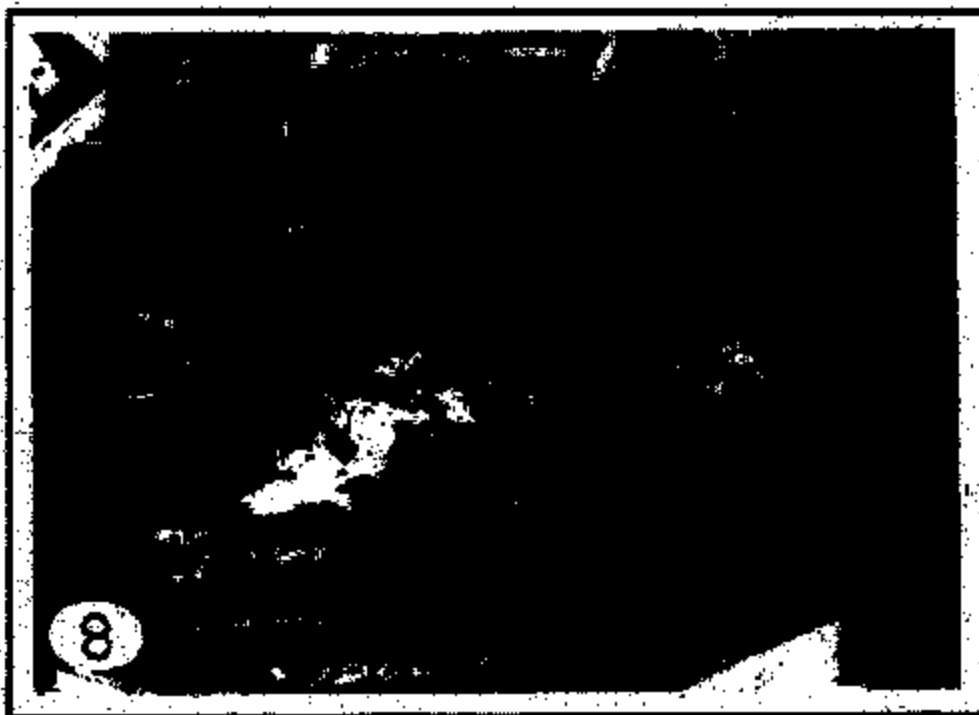


Figure 8. Top View of Engine Compartment Burn Damage

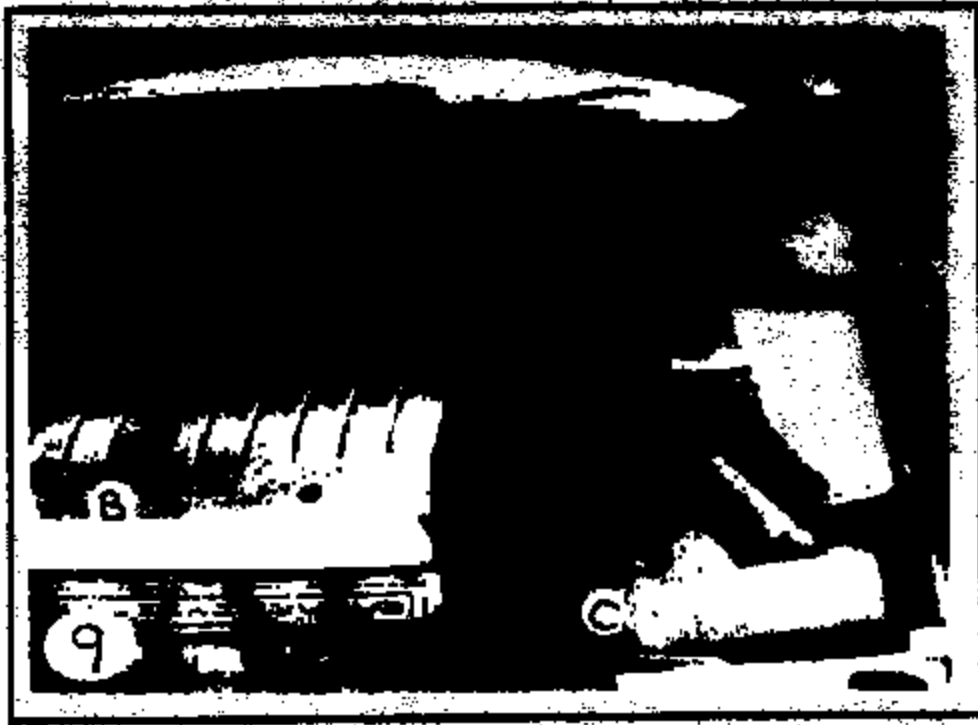


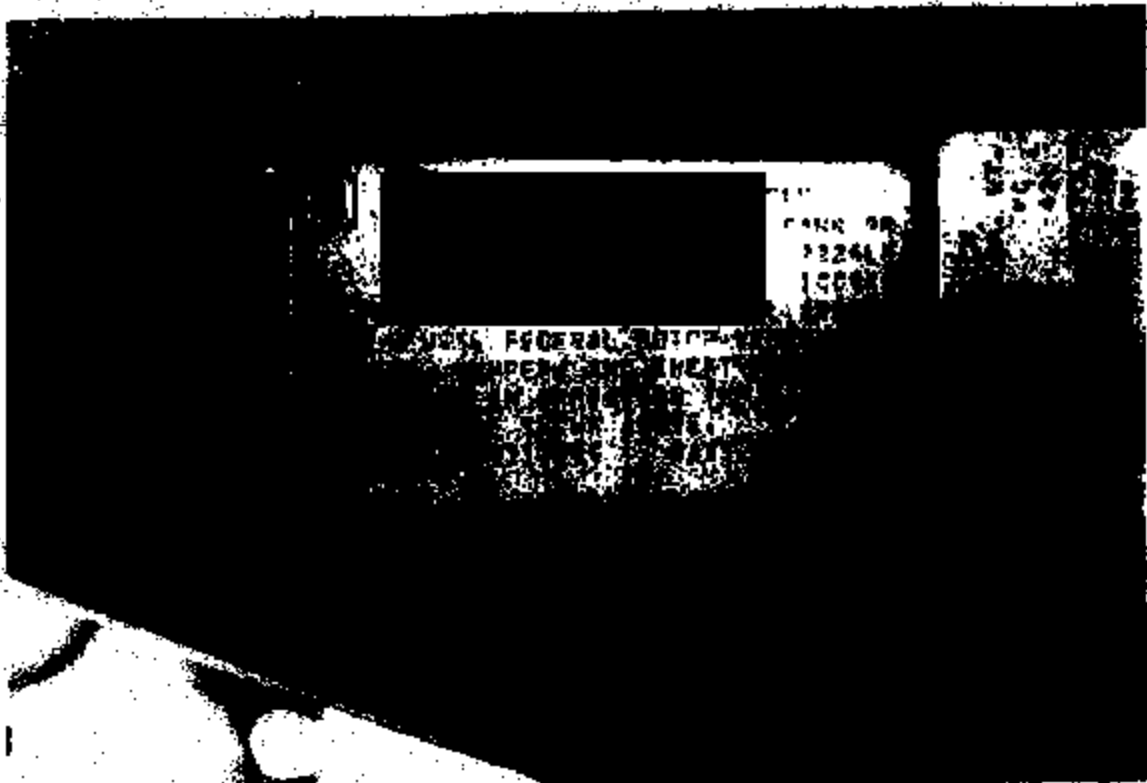
Figure 9. View of Sluiter Undamaged Aurora Engine Compartment



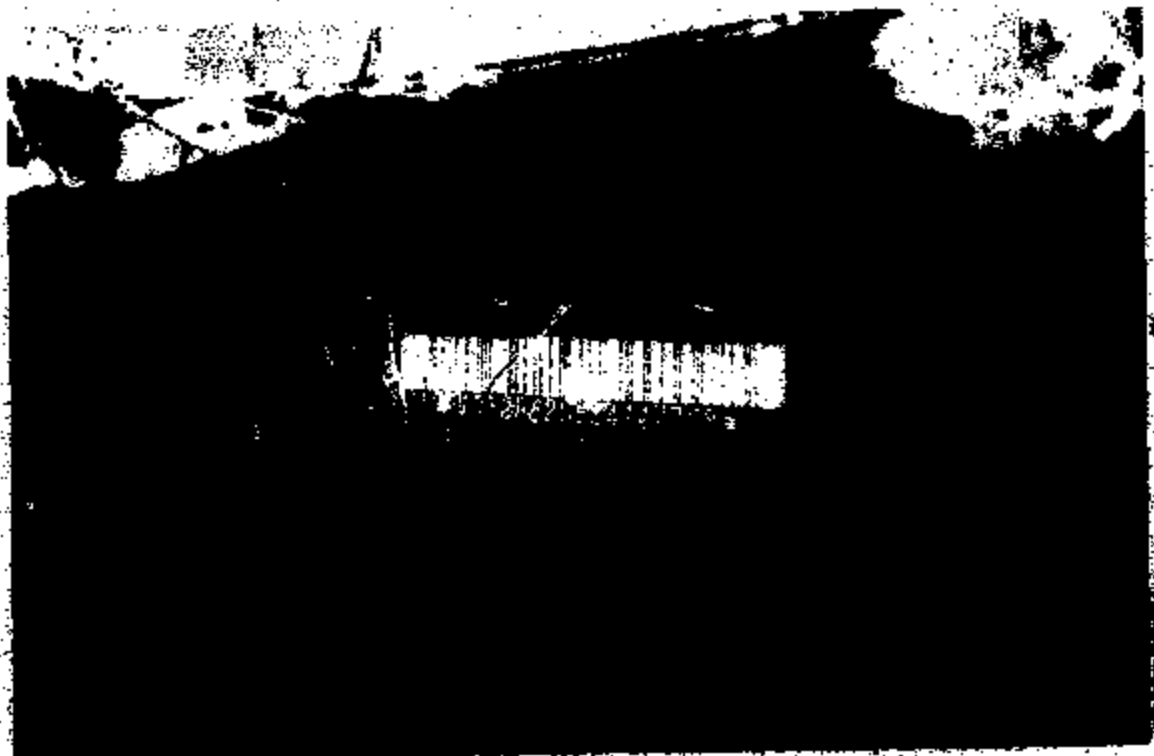
Figure 10. View of Bus Damage Sustained by Engine Compartment Components



**Figure 11. Top View of Burn Damage Sustained by Engine
Compartment Components**



1. A close-up view of the federal manufacturers label depicting vehicle identification number 1G3C53C584117759, identifying the 1985 Oldsmobile Aurora.
-
2. A close-up view of the vehicle identification number identifying said vehicle.





3. A view of the front.

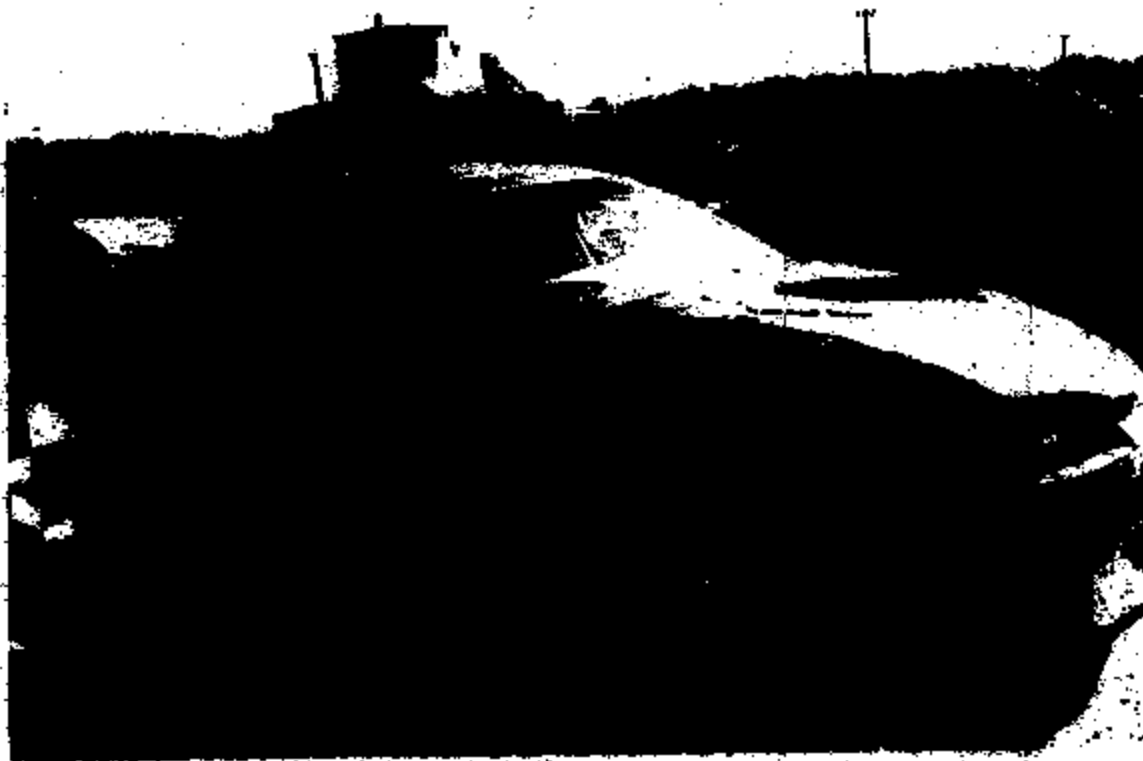
4. A view of the drivers side.





5. A view of the rear.

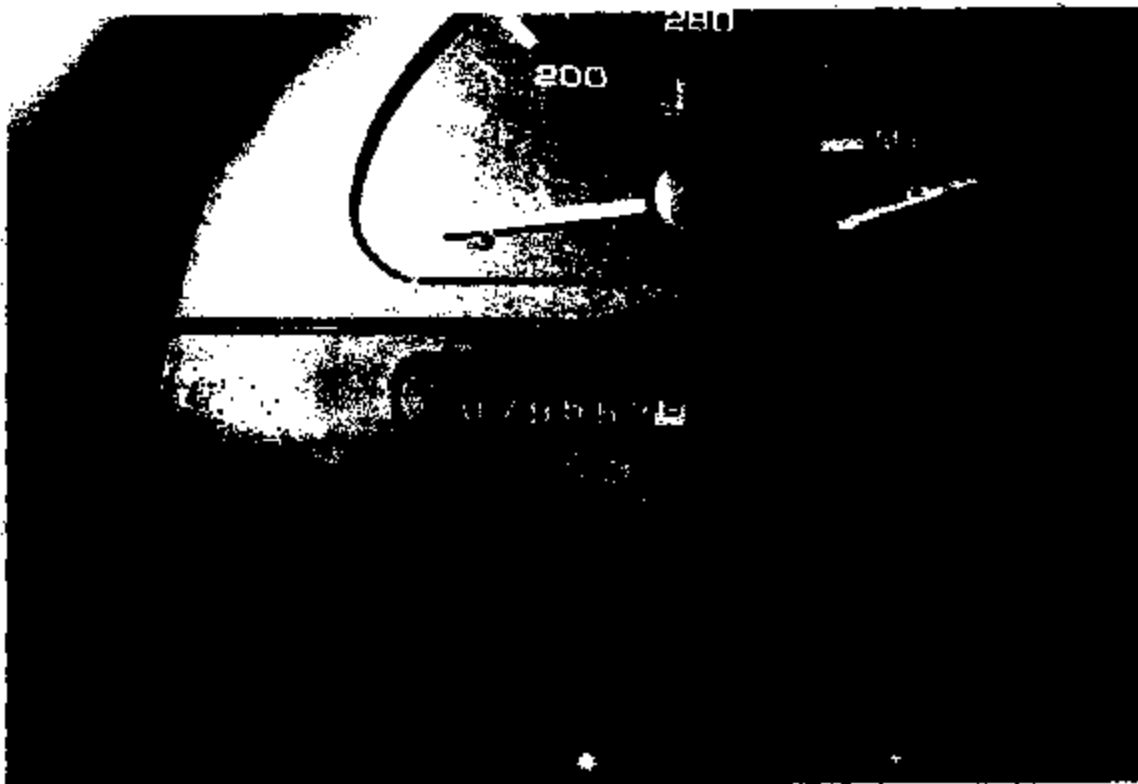
.....
6. A view of the passenger side.





7. A view of the front passenger compartment from the drivers side.

.....
8. A view of odometer showing 79,554 miles.





9. A view of the fuse box depicting aftermarket wiring within same.

.....
10. A view of a hands free microphone for a cellular phone.





11. A view of the rear passenger compartment from the drivers side.

.....
12. A view of the battery and power distribution center intact.





13. A view of the aftermarket wiring travelling to the battery intact.

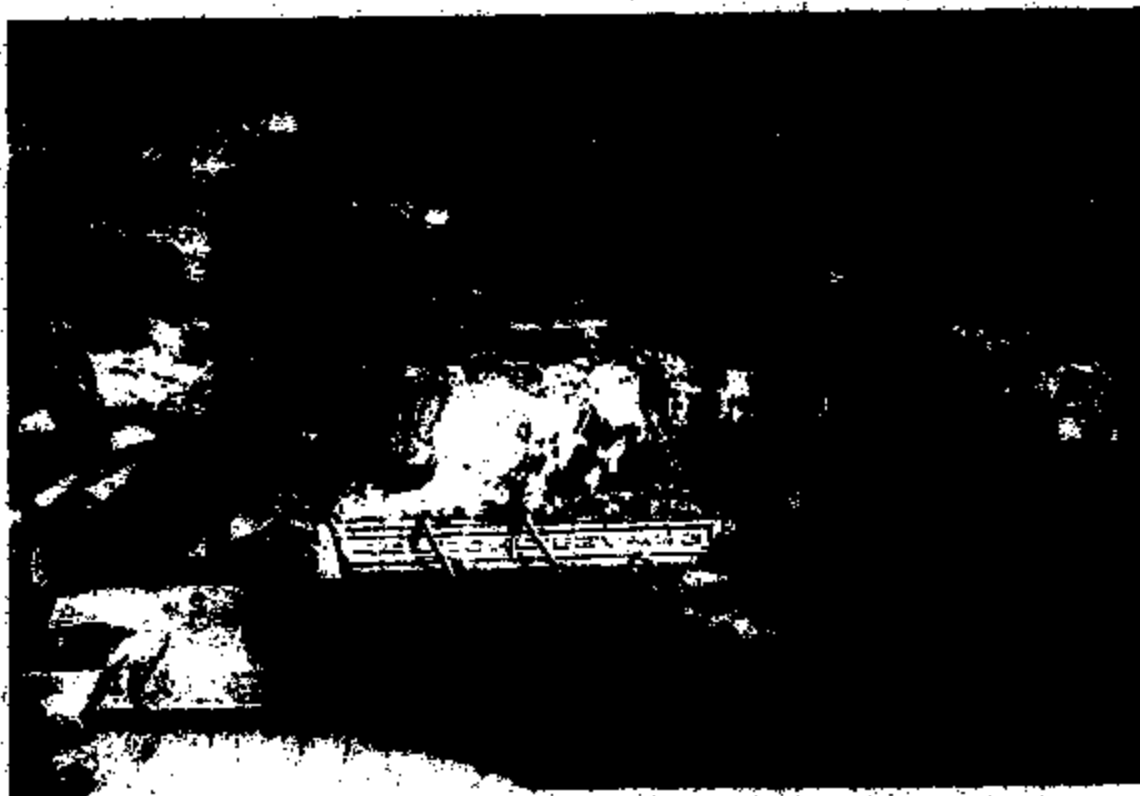
14. A view of the front passenger compartment from the passenger side.





15. A view of heavy fire damage to the aluminum hood.

.....
16. A view of the engine compartment from the front.





..... 17. A view of the engine compartment from the
drivers side.

.....
18. A view of the engine compartment from the
passenger side.





19. A view depicting combustibles present at the rear of the engine closest the bulkhead.

.....
20. A view of the transmission cooler line intact.





21. A view of the metal fuel lines with the combustible section of the line consumed by the fire.

.....
22. A close-up view of the combustible section of the fuel line consumed by the fire closest the bulkhead.





23. An overall view of the area of origin.

.....
24. A close-up view of the fuel line fittings with
the combustible section of the line consumed by
the fire.





25. Another close-up view of the fuel line fittings
at the engine with the combustible section
consumed by the fire.

.....