



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

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

FOR AGENCY USE ONLY 100079

Date Received: **RECEIVED**  
**23 FEB 25 AM 7:11**  
17-JAN-2003

Repository

Reference No.  
10004147

**DEFECTS INVESTIGATION**

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: **KILLEEN** State: **TX** Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]

E-mail Address: [Redacted]

Evening Telephone Number: **342**

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorized person, please provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: **2/18/03**

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number (VIN) or other unique vehicle ID: **JYAVP14E32A002735** Make: **YAMAHA** Model: **ROAD STAR WARRIOR** Model Year: **2002**  
Date Purchased: **11-12-02** Dealer's Name and Telephone Number: **Central Texas Power Sports (512) 948-9922** Engine: **V-Twin** Fuel Type: **mid grade gasoline**  
Original Owner:  Dealer's City: **Georgetown, TX** State: **TX** Zip Code: **78626**  
Transmission Type: **5 Speed Standard**  Antilock Brakes  Cruise Control Powertrain: [Redacted] Vehicle Component Code: **060000 ENGINE AND ENGINE COOLING**  
Multiple Failure: [Redacted]

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

Incident Date(s): **17-JAN-2003** Failure Mileage: **900 Miles** Failure Speed: **5 mph** **Fools Spark Plugs with fuel**

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

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R15): [Redacted]  
DOT No. (Example: DOTM19ABC036): [Redacted]  Original Equipment  Prior Repair Failure Location: [Redacted]  
Tire Component Code: [Redacted] Tire Failure Type: [Redacted]

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

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

**APPLICABLE INCIDENT INFORMATION**

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

Crash:  Yes  No Fire:  Yes  No Number of Persons Injured: **NONE** Number of Deaths: **NONE** Reported to Police: **N**

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

CONSUMER STATES WHILE DRIVING THE MOTORCYCLE AT HIGH-SPEED AND NO WARNING THE VEHICLE GOT SHUT OFF. CAUSING CONSUMER TO PULL OFF THE ROAD. DEALER HAS BEEN NOTIFIED. PLEASE PROVIDE FURTHER INFORMATION. TS

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

The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

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

The motorcycle dies out at low speeds when you depress the clutch to stop at a stoplight etc. This seems to happen within the first 30 minutes of a trip. I do warm it up for about 4 to 5 minutes before taking off on a trip.

This is a fuel injected engine.

When it dies out in the middle of the street and the light turns green, you become a hazard at this point.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department  
of Transportation

National Highway  
Traffic Safety  
Administration

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

Official Business  
Penalty for Private Use \$300

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
DOT Auto Safety Hotline, NSA-10.1  
400 7th Street, SW  
Washington, DC 20590

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**VEHICLE  
OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
ON

**DASH2DOT**

and dial toll free at

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**1-888-327-4236**

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(DASH) 2 DOT



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