



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 335

Date Received

2003 JUL 11 AM 9:43

Repository

Reference No.

10021587

OWNER INFORMATION (Type or Print)

Name

Address

City

DEAL

State NJ

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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

In the absence of an authorized vehicle dealer, NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield or driver's side

NOT AVAILABLE

SALMB114X3A10587

Make

LAND ROVER

Model

ROVER

Model Year

2002

2003

Date Purchased

7-01-2002

Dealer's Name and Telephone Number

SCHNEIDER & NELSON

Engine:

No: Cylinders

Fuel Type:

Original Owner

Dealer's City

W. LONG BRANCH

State

NJ

Zip Code

0724

Transmission Type

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

114100 ELECTRICAL SYSTEM: WIRING: FRONT UNDERHOOD

Multiple Failures:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

23-MAY-2003

Failure Mileage

5000

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM1SABC036)

Original Equipment
 Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

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

Crash

Yes No

Fire

Yes No

Number of Persons Injured

Number of Deaths

Reported to Police

N

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

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

YEAR OF VEHICLE IS 2002. WHILE DRIVING THE VEHICLE THE REAR PASSENGERS BEGAN TO COUGH, CONSUMER TURNED AROUND AND NOTICED SMOKE FILLING THE CAB OF THE VEHICLE. WITHIN SECONDS VEHICLE CAUGHT FIRE AND WAS TOTALED. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

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