



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 252

Date Received: 2003 MAY 28 3:03 AM H:
Repository:
Reference No.: 10021795

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: BLOSSBURG State: PA Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]
Evening Telephone Number: [Redacted]
E-mail Address: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an authorized signature, please print your name and address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 6/16/03

VEHICLE INFORMATION

Make: HARLEY DAVIDSON Model: ULTRA CLASSIC Model Year: 1995/1998
Date Purchased: OCT 01 Dealer's Name and Telephone Number: LARRY'S SPORTS CENTER
Original Owner: Dealer's City: GALETON State: PA Zip Code: 16922
Transmission Type: Antilock Brakes Powertrain: Vehicle Component Code: 350000 EQUIPMENT
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 28-MAY-2003 Failure Mileage: 34,500 Failure Speed: APPROX

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: DOTM1A9ABC036): [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: 0 Number of Deaths: 0 Reported to Police: N

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

THE TOUR PACK BRACKET SNAPPED IN HALF. *TT
NOTICED TOUR PACK MOVED WHEN OPENING LID,
LIGHT METAL TUBING WHICH SUPPORTS TOUR PACK AS
WELL AS PASSENGER BACKREST HAD BUCKLED ON RIGHT
SIDE AND CRACKED ON LEFT SIDE AT BOLT SITES.
NEARLY HAD TO REPLACE PART. NEW PART IS
MODIFIED. I KEPT THE BROKEN PART. WORK DONE AT *

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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.

* LANCE'S HD MANNSFIELD PA
(570) 659-5000