

**DOT Auto Safety Hotline**

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

**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 1367

Date Received

2003 MAY 24
30-MAY-2003Repository Reference No.
10021898**OWNER INFORMATION (Type or Print)**

Name

Address

City STATEN ISLAND

State NY

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 NHTSA WILL NOT provide you with an address to the vehicle manufacturer.
Signature of Owner _____ Date 5/17/03

VEHICLE INFORMATION

Make

VOLVO

Model

S60

Model Year

2003

Date Purchased

12-31-02

Dealer's Name and Telephone Number

Red Bank Volvo 1-732-741-5886

Engine:

No. Cylinders

5

Fuel Type:

Gas

Original Owner

Dealer's City
RED BANK

State

NJ

Zip Code

07701

Transmission Type

Auto.

 Antilock Brakes Cruise Control

Powertrain

Vehicle Component Code

192000 TIRES:SIDEWALL

Multiple Failure: 4

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

18-JAN-2003

Failure Mileage

1000 to 1700

Failure Speed

3000 to 6000 3 MPH

5-29-03 ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

PIRELLI

Tire Model (Name or Number)

TIRE

Tire Size (Example P215/65R15)

P235/45R17

DOT No. (Example: DOTM15ABC036)

 Original Equipment Prior Repair

Failure Location:

Tire Component Code

192000 TIRES:SIDEWALL

Tire Failure Type

SIDEWALL CRACKING

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

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

Crash

 Yes No

Fire

 Yes No

Number of Persons Injured

Number of Deaths

Reported to Police

N

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

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

VEHICLE'S TIRES SIDE WALLS ARE VERY WEAK, THE SLIGHTEST TOUCH/BRUSH CAUSES THEM TO GO FLAT. TIRES WERE REPLACE. THE REPLACEMENT TIRE HAD A BUBBLE. MODEL TYPE 4 SEASONS. *AK

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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.

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**