



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1368

Date Received

2003 JUL 11
16-JUN-2003

Repository ☐

Report No.
10024052

OWNER INFORMATION (Type or Print)

Name

Address

City

EDMOND

State OK

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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 7/1/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1GGCS19X1V8650203

Make
ISUZU

Model
HOMBRE

Model Year
1997

Date Purchased
MAY 99

Dealer's Name and Telephone Number
BIG RED IMPORTS

Engine
No. Cylinders
6

Fuel Type:
GASOLINE

Original Owner
☐

Dealer's City
NORMAN

State
OK

Zip Code

Transmission Type
AUTOMATIC

☒ Antilock Brakes
☐ Cruise Control

Powertrain

Vehicle Component Code

136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
06-JUN-2003

Failure Mileage
53000

Failure Speed
65 MPH

WINDSHIELD WIPERS WORK SOMETIME, NOT OTHERS.
(6) INTERMITTENT FAILURE DURING RAINSTORM.

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: DOTM15ABC036)

☐ 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 incident(s), crash(es), and injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

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).

CONSUMER'S VEHICLE EXPERIENCES SAME PROBLEM AS MENTIONED IN RECALL #03V210000 CONCERNING WINDSHIELD WIPER MOTOR. DEALER WILL NOT REPAIR VEHICLE BECAUSE IT WAS NOT INCLUDED IN RECALL DUE TO VIN. #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 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)

1) DRIVING AT NIGHT ON FOUR LANE HIGHWAY IN A THUNDERSTORM,
WIPERS WOULD NOT START.

2) DRIVING ON UNPAVED SURFACE ROAD. WIPERS CAME ON
BUT STOPPED AFTER FIRST PASS.

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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 78173 WASHINGTON, D.C.

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

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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COMPLETE THIS FORM

OR

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and dial toll free at

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(DASH) 2 DOT



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