



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: **JUL 29 11 08 13**

Repository ☐

19-JUN-2003

Reference No.
10024432

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: **PITTSBURG** 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? ☒ YES ☐ NO
In the absence of a signature, provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: **7/13/03**

VEHICLE INFORMATION

Vehicle Identification Number (located at front of vehicle): [REDACTED]
Make: **ISUZU** Model: **AXIOM** Model Year: **2002**
Date Purchased: **2-28-03** Dealer's Name and Telephone Number: **WRIGHT ISUZU (724) 935-4646** Engine: [REDACTED] Fuel Type: [REDACTED]
Original Owner: ☒ Dealer's City: **WEXFORD** State: **PA** Zip Code: **15090**
Transmission Type: **Automatic** ☒ Antilock Brakes ☒ Cruise Control Powertrain: [REDACTED] Vehicle Component Code: **Q20000 SUSPENSION**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): **15-JUN-2003** Failure Mileage: **200** Failure Speed: **50 MPH**
Description: **CAR STEERING WHEEL SHAKES AND VIBRATES ON THE ROAD WHEN REACHING THIS SPEED.**

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).

WHEN DRIVING AT HIGHWAY SPEED STEERING WILL VIBRATE AND SHAKE. DRIVESHAFT WAS REPLACED, AND THE PROBLEM STILL OCCURRING. *AK WHEN CAR IS BACKING UP A THUMP IS FELT ON ENGINE REVOLUTION ON MAKE DRIVER SIDE. AXLES WAS REPLACE AND PROBLEM STILL OCCURRING.
JL

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 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)

WHEN THE CAR REACHES A HIGHER SPEED OF 50 MPH, IT SHAKES
AND IT IS NOT SAFE TO DRIVE AT THESE SPEEDS. THEY HAVE (OWNER)
REPAIRED THE DRIVE SHAFT AND AXLES BUT THERE IS NO DIFFERENCE
I AM STILL HAVING THIS PROBLEM. A LOSS OF CONTROL WITH
THIS VEHICLE IS GREATER FELT IN TURN'S

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
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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QUESTIONNAIRE**

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TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

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and dial toll free at

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1-888-327-4238

DOT Auto Safety Hotline
(DASH) 2 DOT



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http://www.nhtsa.gov/defects

**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).**