

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>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</p>		<p>FOR AGENCY USE ONLY 1220</p>	
<p>Name: [REDACTED]</p>		<p>Date Received: 2008 AUG 22 AM 9:46</p>		<p>Repository <input type="checkbox"/></p>	
<p>Address: [REDACTED]</p>		<p>03-JUL-2003</p>		<p>Reference No. 10026559</p>	
<p>City: PENSACOLA State: FL Zip Code: [REDACTED]</p>		<p>Daytime Telephone Number: [REDACTED]</p>		<p>E-mail Address: [REDACTED]</p>	
<p>Evening Telephone Number: [REDACTED]</p>		<p>Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>In the absence of a signature, provide your name or address to the vehicle manufacturer. Date: 7/21/03</p>			
<p align="center">VEHICLE INFORMATION</p>					
<p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2P4FH25KXLR62655L6</p>		<p>Make: PLYMOUTH</p>		<p>Model: GRAND VOYAGER</p>	
<p>Model Year: 1990</p>		<p>Date Purchased: 9/94</p>		<p>Dealer's Name and Telephone Number: Pensacola Chrysler Plymouth 850-477-8385</p>	
<p>Original Owner: [REDACTED]</p>		<p>Dealer's City: Pensacola</p>		<p>Engine: No. Cylinders: 4</p>	
<p>State: FL Zip Code: 32505</p>		<p>Fuel Type: unleaded</p>		<p>Transmission Type: Automatic</p>	
<p><input type="checkbox"/> Antilock Brakes</p>		<p>Powertrain: Front wheel drive</p>		<p>Vehicle Component Code: 191000 TIRES:TREAD/BELT</p>	
<p><input checked="" type="checkbox"/> Cruise Control</p>		<p>Multiple Failure: 1</p>		<p>Failed Component(s)/Part(s) Information</p>	
<p>Incident Date(s): 6-14-03</p>		<p>Failure Mileage: [REDACTED]</p>		<p>Failure Speed: 65 mph</p>	
<p align="center">ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>					
<p>Tire Make: DAYTON</p>		<p>Tire Model (Name or Number): 100020</p>		<p>Tire Size (Example P215/65R15): P195/75R 14MS</p>	
<p>DOT No. (Example: DOTM1BABC036): YUKASE1</p>		<p><input checked="" type="checkbox"/> Original Equipment</p>		<p>Failure Location: Interstate 10 Pensacola FL</p>	
<p><input type="checkbox"/> Prior Repair</p>		<p>The Failure Type: tread rubber separated from tire</p>			
<p align="center">ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>					
<p>Make: [REDACTED]</p>		<p>Date Manufactured: [REDACTED]</p>		<p>Model No./Name: [REDACTED]</p>	
<p>Seat Type: [REDACTED]</p>		<p>Installation System: [REDACTED]</p>			
<p>Child Seat Component Code: [REDACTED]</p>		<p>Failed Part: [REDACTED]</p>			
<p align="center">APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Condition(s), and Injury(ies).)</p>					
<p>Crash: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Fire: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Number of Persons Injured: [REDACTED]</p>	
<p>Number of Deaths: [REDACTED]</p>		<p>Reported to Police: N</p>			
<p>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).</p>					
<p>WHILE DRIVING FRONT RIGHT TIRE BLOWOUT. TREAD SEPARATED FROM THE ACTUAL TIRE. CONSUMER DID NOT HIT ANYTHING. THERE WAS NO WARNING. BOBE KING COURIER (DAYTON) 195 - 75R 14 MS, DOT#V6IARC1, 17608299. *Vehicle was very difficult to control was traveling at speed of 65 mph and situation was very dangerous. This tire has never experienced a flat or had any repairs made to it. No prior warning, tire did not blow, but separated tread from the actual tire. Very noisy tire well. over</p>					
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Invo(s). ATTACH ADDITIONAL SHEETS IF NECESSARY.</p>					
<p>The Privacy Act of 1974 (Public Law 93-579) This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration 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.</p>					

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

Original file is available for inspection.

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

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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



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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http://www.nhtsa.dot.gov/questionnaire