



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 100161

Date Received

10-JUL-2003

Repository ☐

File No.
100262993

OWNER INFORMATION (Type or Print)

Name

Address

City

SIERRA VISTA

State AZ

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?
In the absence of an _____ or address to the vehicle manufacturer.
Signature of Owner _____ Date 7/11/02

VEHICLE INFORMATION

Make

JAYCO

Model

EAGLE

Model Year

2001

Date Purchased

12-18-02

Dealer's Name and Telephone Number

RV City 520 456 9292

Engine:

No. Cylinders

8

Fuel Type:

GAS

Original Owner

Dealer's City

HEASLER CITY

State

AZ

Zip Code

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

FEAR

Vehicle Component Code

022100 SUSPENSION: REAR: SPRINGS

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

0

Failure Mileage

11000

Failure Speed

ON

ENGINE

NOT COMPLETELY FAILED OUT
ON THE WAY TO A LPG LEAK

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: DOTM4JABC036)

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

Crash

☐ Yes ☒ No

Fatality

☐ 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 (e.g., parts repaired or replaced (and if old part is available)).

THE VEHICLE WAS TAKEN TO THE RV DEALER TO PUT AIR IN THE TIRES. THE MECHANIC NOTICED THE REAR RIGHT SPRINGS ARE CUTTING THE LIQUEFIED PROPANE LINE. THE CONSUMER PUT A TEMPORARY FIX ON THE LP LINE. PLEASE PROVIDE DETAILS. *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)

A possible fire hazard due to the LPG line being located such that the rear spring under load can rub and abrade thru the metal pipe. Should be a factory recall to fix and relocate this LP line!!!

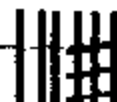
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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73175 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY MAIL. 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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DOT Auto Safety Hotline
(DASH) 2 DOT



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<http://www.safercar.gov>