



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 100147

Date Received

Repository ☐

Reference No.
10031802

2003 SEP -2 AM 11:02

OWNER INFORMATION (Type or Print)

Name

Address

City

DOVER

State

FL

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 1-1-1

VEHICLE INFORMATION

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

1G6CS1440V8650965

Make

ISUZU

Model

AMIGO
HOMBRE

Model Year

1997

Date Purchased

Dealer's Name and Telephone Number

AUTOGROUP (863)667-0808

Engine:

No. Cylinders

4

Fuel Type:

GAS

Original Owner

☒

Dealer's City

TAMPA

State

FL

Zip Code

33619

Transmission Type

☒ Antilock Brakes

Powertrain

STANDARD

☐ Cruise Control

Vehicle Component Code

136200 VISIBILITY: WINDSHIELD WIPER/WASHER: MOTOR

Multiple Failure: 1

FAILED COMPONENT(S) / PART(S) INFORMATION

Incident Date(s)

15-JUL-2003

Failure Mileage

46,500

Failure Speed

65

REPAIRED OCCURRENCES MAKING
VEHICLE UNSAFE TO DRIVE

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: DOTM19ABC038)

☐ 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(es).)

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(es):
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 STATES THAT WINDSHIELD WIPERS ARE ON RECALL. CONSUMER STATED THAT DEALER WON'T HONOR RECALL *AK

OBTAINED NOTIFICATION OF RECALL JUNE 3, 03
CALLED MADE APPOINTMENT TO HAVE WINDSHIELD PROBLEM
CORRECTED BROUGHT CAR IN AT TIME 8:15 6/1/03
WAITED TILL 10:30 TO BE TOLD THEY DID NOT HAVE
PART. THEY WOULD ORDER - 199 OF 8/14/03 AS I HAVE
NOT HEARD FROM THEM. THEY SEND A LETTER SAYING THEY

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.

TRIED TO REACH ME BUT NO MESSAGE LEFT ON PHONE,
THEY WANTED TO KNOW IF I WAS COMPLETELY SATISFIED
WITH REPAIRS

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

P.S. AFTER SEVERAL CALLS TO CUSTOMER SERVICE DEPT - SOMEONE WAS SENT OUT TO MY HOME ON 8/15/03 TO PICK UP MY CAR AND HAVE IT REPAIRED - VERY POOR COMMUNICATION BETWEEN MANUFACTURER & DEALER SHOP AND CUSTOMER SERVICES - A ACCIDENT CAUSED DURING THIS TIME ~~IT~~ CAUSED BY WINDSHIELD WIPER FAILURE COULD HAVE RESULTED IN MAJOR LAIN ~~AND~~ SUIT

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration
http://www.safercar.gov