



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

2003 OCT 12
08-SEP-2003

Repository

Part No.
10038446

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City BRITISH COLUMBIA State DO Zip Code _____

Daytime Telephone Number _____

E-mail Address _____

Evening Telephone Number

JAM R.

Do you authorize NHTSA to contact the manufacturer of your vehicle? YES NO
In the absence of an authorized representative, please provide the name or address of the vehicle manufacturer.
Signature of Owner _____ Date 29/10/03

VEHICLE INFORMATION

17-digit Vehicle Identification Number Located at bottom of windshield on driver's side: JKARLEA103DA05245
Make: KAWASAKI Model: KAWASAKI 650 Model Year: 2003

Date Purchased: MARCH 19/03 Dealer's Name and Telephone Number: ROYALTY SUBARU WHOLESALE
Engine: No. Cylinders: 1 Fuel Type: GAS

Original Owner: Dealer's City: NELSON State: B.C. Zip Code: V1L

Transmission Type: Antilock Brakes Cruise Control Powertrain: _____
Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): AUG 23/03 Failure Mileage: 10,265 K. Failure Speed: 20 K. CAM CHAIN ADJUSTOR SPRING.

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: DOTMALSABCR36): _____ 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, failure, crash, and injury, if any.)

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(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).

THE MOTORCYCLE CAM CHAIN ADJUSTER BROKE, CAUSING THE VEHICLE TO STALL WHILE DRIVING. KAWASAKI, KLR 650, 2003. *AK SPRING.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. **ATTACH ADDITIONAL SHEETS IF NECESSARY**

The Privacy Act of 1974 (Public Law 93-502) 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.

