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 ☐
10-SEP-2003 (2003 OCT 12 PM 2:48)	Reference No. 10039665

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	
City: LAS VEGAS	State: NV	Zip Code: [redacted]	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 __/__/__

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
4S2CK58H244300192	ISUZU	RODEO	2000

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
12/29	Courtesy Imports			6	Regular
Original Owner ☒	Dealer's City: Henderson	State: NV	Zip Code: 89014		

Transmission Type			Vehicle Component Code
Auto	☒ Antilock Brakes ☒ Cruise Control	Powertrain	103000 POWER TRAIN:AUTOMATIC TRANSMISSION Multiple Failure: 1 numerous

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
15-JUN-2003	69,000		

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 SHIFTING GEARS TRANSMISSION SLIPS TO A LOWER GEAR. CONSUMER NOTIFIED THE DEALERSHIP. *AK

The gear shift does NOT go into gear on occasion. The only way to check the gear indicator by the speedometer. The dealer said they did not have the unit in stock, and there were NONE in entire U.S.

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