



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 100079

Date Received	Repository <input type="checkbox"/>
18-SEP-2003	Reference No. 10039908

Daytime Telephone Number	E-mail Address
Evening Telephone Number	

OWNER INFORMATION (Type or Print)

Name: [REDACTED]

Address: [REDACTED]

City: RINGLED State: WI Zip Code: [REDACTED]

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

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 4CE676F11Y7283241	Make COLEMAN	Model GARMIN SEDONA	Model Year 2001 2000
Date Purchased APRIL 2003	Dealer's Name and Telephone Number MIDWEST RVE HOMES 9405 SCHOFIELD AVE		Engine: No. Cylinders
Original Owner <input type="checkbox"/>	Dealer's City SCHOFIELD	State WI	Zip Code 54476
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Vehicle Component Code 190000 TIRES
	<input type="checkbox"/> Cruise Control		Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 12-SEP-2003	Failure Mileage 125 MI ON 1ST 225 MI ON 2ND	Failure Speed 80 55
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make UNKNOWN TITAN	Tire Model (Name or Number) UNKNOWN 4QJU MTR 190	Tire Size (Example P215/65R15) SF 175/80R15
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location: PASSENGER SIDE REAR / DRIVERS SIDE
Tire Component Code 191000 TIRES:TREAD/BELT	4QJU MTR 190	Tire Failure Type TREAD SEPARATION

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

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

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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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).

WHILE TRAVELING ON THE HIGHWAY AT APPROX. 55MPH, ON TWO DIFFERENT OCCASION THE RIGHT AND LEFT REAR TIRE TREAD SEPARATED RAPIDLY, RESULTING IN COMPLETE DESTRUCTION OF THE TIRE. DEALER NOTIFIED. PLEASE PROVIDE FURTHER INFORMATION. TITAN MODEL. AND SIZE UNKNOWN. VEHICLE IS COLEMAN SEDONA. PLEASE SEND COPY OF THE REGISTRATION. *PH

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.

VEHICLE IDENTIFICATION NUMBER 4CE676F11Y7283241 YEAR 2000 MAKE COLEM BODY STYLE 10 VEHICLE TYPE CAMP FLEET NUMBER MBH MHA6508

TITLE NUMBER [REDACTED] DATE TITLE ISSUED 04/17/2003 THIS VEHICLE IS EXEMPT FROM ODOMETER DISCLOSURE ODOMETER ODOMETER DATE

REGISTERED OWNERS [REDACTED] SINGLE MI [REDACTED]

The person, firm, or corporation named on this Title has been duly registered as the lawful owner of the vehicle described, subject to any Security Interest (lien) shown. The order in which the Security Interests appear on this Title does not necessarily represent their priority.

CONTROL NUMBER (This is not a Title Number) 2-5538638



DIVISION OF MOTOR VEHICLES

Important - Buyer and Seller must complete the section below at time of sale

TITLE ASSIGNMENT AND MILEAGE, SELLING PRICE AND BRAND DISCLOSURE BY REGISTERED OWNER(S) SHOWN ABOVE

Federal and State law requires that SELLER state the mileage and provide written vehicle disclosure information in conjunction with transfer of ownership. Failure to complete a mileage statement, disclose required information, or providing a false statement may result in fines and/or imprisonment and may make you liable for damages to the transferee (buyer).

SELLER (Print Person's Name signing as Seller) Print Seller's Address, City, State, Zip (if different than shown above)

ODOMETER NOW READS (In Tenth): and to the best of my knowledge is actual mileage of this vehicle unless one of the following statements is checked. The odometer reading reflects the amount of mileage in mileage of its mechanical part. The odometer reading is NOT actual mileage. WARNING ODOMETER DISCREPANCY

BRAND DISCLOSURE (All to be printed on above lines) Check all that apply: Flood damaged vehicle, Previous police vehicle, Salvage vehicle, Other (specify):

I, the seller, certify that to the best of my knowledge the information contained on this document is true and correct and that I have advised the vehicle odometer reading, brand disclosure and selling price herein in compliance with Federal and state law as referenced above. For value received, I hereby sell, assign or transfer the vehicle described on this document and warrant title to Purchaser as shown. Signature of Seller(s). See "REGISTERED OWNERS" above. If joint ownership with "or", only one seller's signature required; with "and", all seller's signatures required.

SELLING PRICE (Dollar only): \$

BUYER (Purchaser) Print Name(s) Print Buyer Address, City, State, Zip

If Buyer is a business, Print Name of authorized person signing as Purchaser. Signature of Purchaser(s) Date

If registered owner is a dealer and first assignment is through auction or salvage pool, complete the following. Print Consigning Auction Dealer Name or Consigning Salvage Pool Name Auction or Salvage Pool Dealer No. Sale Date

The Wisconsin Department of Transportation will not be responsible for false or fraudulent odometer statements made in the assignment of the Certificate of Title or for errors in recording by the department. The department makes no warranties, express or implied, about the vehicle or opening condition and any statements about vehicle inspections are only administrative.

PURCHASER - Attach form MV1 (Wisconsin Application for Title) to this document and mail or deliver immediately to the Wisconsin Department of Transportation. Form MV1 is available at Wisconsin DMV Service Centers and police stations. MV2299 7/8002 (3) TDES Ch. 342VMc. Stats

MAIL ADDRESS - Wisconsin Dept. of Transportation, P.O. Box 7949, Madison, WI 53707-7949

QUESTIONS - Contact nearest Motor Vehicle Service Center, or call 608/265-1400

ANY ALTERATION OR ERASURE VOIDS THIS TITLE. KEEP IN A SAFE PLACE. Seller must give to purchaser at time of sale.