



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

(1-888-327-4238)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

Date Received

2003 SEP 15 PM 2:21

Od_or _____
R_dt _____
od_r _____
up_itr _____

Reference No.

10040066

OWNER INFORMATION (Type or Print)

Name

Street No.

Apt. No.

City FLUSHING

State NY

Daytime 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 9/3/03

PRODUCT INFORMATION

Vehicle Identification No. (VIN.)
(17 Digits)

(Located at bottom of
windshield on driver's side)

Make

BUIAK

Model

CENTURY

Year

1995

Purchased Date

Dealer's Name

Engine Size
(CID/CCL)

Turbo

Diesel

Gas

Fuel Injection

Dealer's City

State

Zip Code

No. Cylinders 16

New Used

Manufacture Date
(on driver's door or pillar)

Transmission Type

Manual

Automatic

Restraint System

Driver's Side Air Bag

Motorbelt

Passenger's Side Air Bag

2-Point Belt

3-Point Belt

Cruise Control

Yes

No

Drivetrain

Front

Rear

4-Wheel

Vehicle Type

Car

Sport Utility

Van

Truck

Minivan

Motorcycle

Other

Body Style

2-Door

4-Door

Stationwagon

Pick Up Truck

Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)

Location

Left

Right

Front

Rear

Failed Part(s)

Original

Replacement

Handicap Adaptive Equip

Yes

No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand KELLY

Tire Name SUPRA RIDE WS

Complete Tire Size 185/75 R 14

No. of Failures ONE

Date(s) of Failure(s) 3/3/02

Mileage at Failure(s) 72,500

Vehicle Speed at Failure(s): 20-25

Failed Part(s)
Available?

Yes

No

NHTSA Previously
Contacted?

Yes

No

APPLICABLE INCIDENT INFORMATION

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

Crash

Yes No

Fire

Yes No

Number of Persons Injured

None

Number of Fatalities

None

Reported to Manufacturer

Yes No

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

I WENT TO TIRE REPAIR SHOP TO FIX THE FLAT
SERVICE MAN INSPECTED THE TIRE AND TOLD ME
THAT THE TIRE IS DEFECTIVE - DEVELOPED A
DEEP CRACK ALL ALONG THE TIRE CONTACTED.
MAN IS WHO REPLACED THE TIRE. MY QUESTION IS
ARE THE OTHER THREE TIRES ARE ALSO DEFECTIVE
I HAVE CONTACTED GOODYEAR TO ABSOLVE
THE PROBLEM.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

Mail postage free or fax to 202-366-7882