



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.

17040485

24-SEP-2003

OWNER INFORMATION (Type or Print)

Name

Address

City

CONNERSVILLE

State IN

Zip Code

Daytime Telephone Number

Mail Address

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

Make

INDIAN

Model

SCOUT

Model Year

2002

Date Purchased

5-7-02

Dealer's Name and Telephone Number

INDIAN MOTORCYCLE (513)671-8400

Engine

No. Cylinders

2

Fuel Type:

GAS

Original Owner

1

Dealer's City

CONNERSVILLE

State

IN

Zip Code

47331

Transmission Type

5/6000

☐ Antilock Brakes

☐ Cruise Control

Powertrain

Vehicle Component Code

121000 EXTERIOR LIGHTING-HEADLIGHTS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12-AUG-2003

Failure Mileage

Failure Speed

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: DOTM18ABC036)

☐ 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

☐ 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).

CONSUMER WENT TO A INDIAN DEALERSHIP TO TAKE CARE OF RECALLS FOR THE HEADLAMP AND GASOLINE. HOWEVER, THE DEALERSHIP WOULD NOT HONOR THE RECALLS DUE TO THE FACT THAT INDIAN MOTORCYCLE WAS GOING OUT OF BUSINESS.*AK

ALSO ABOUT FENDER COULD FALL OFF

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.