


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	
 U.S. Department of Transportation National Highway Traffic Safety Administration				Data Received	
				MAR -3 PM 2:44	
OWNER INFORMATION (Type or Print)				Reference No. 10061257	
Name		Apt. No.		Deadline Telephone Number	
Street		204			
City Meriden		State CT		Zip Code	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA will NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner				Date 02/19/04	
PRODUCT INFORMATION					
Vehicle Identification No. (VIN.) (17 Digits) <small>(Located at bottom of windshield on driver's side)</small>			Make AII	Model AII	Year AII
Purchased Date	Dealer's Name		Engine Size (CID/CCL)		<input type="checkbox"/> Turbo
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City		State	Zip Code	<input type="checkbox"/> Diesel
Manufacture Date (on driver's door or pillar)		Transmission Type	Restraint System	Cruise Control	Drivetrain
		<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Driver's Side Air Bag <input type="checkbox"/> Motorbell <input type="checkbox"/> Passenger's Side Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
				Vehicle Type	Body Style
				<input type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other AII	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other AII
FAILED COMPONENT(S)/PART(S) INFORMATION					
Part Name(s)		Location		Failed Part(s)	Handicap Adaptive Equip
		<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear		<input type="checkbox"/> Original <input type="checkbox"/> Replacement	<input type="checkbox"/> Yes <input type="checkbox"/> No
TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Brand			Tire Name		
Complete Tire Size			DOT No.		
No. of Failures	Date(s) of Failure(s)		Failed Part(s) Available?		NHTSA Previously Contacted?
	Mileage at Failure(s)		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)				
APPLICABLE INCIDENT INFORMATION					
<i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)</i>					
Crash		Fire		Number of Persons Injured	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		Number of Fatalities	
				Reported to Manufacturer	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).					
I am using this form, sent to me by one of your staff, to make a recommendation.					
One of the most desirable, and useful, non-standard safety features I have had the pleasure of experiencing was on a 1985 Nissan Maxima I owned. It is the feature that shines a light illuminating the area toward the side and slightly forward of the vehicle, continuously, when the turn signal is being operated. That really helps you to see the edges of an unmarked roadway, the curb, any pedestrian, in dark clothing, etc. at a corner. It has been offered on some of the more prestigious American vehicles as well and					
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 responses 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.					

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

it should be an item of MANDATORY equipment on every make and model of vehicle!

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300

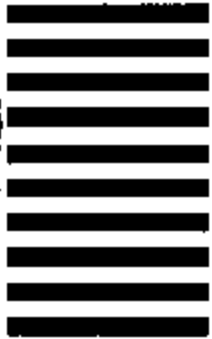


NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.



U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

Complete and return or place in your car manual for future use



VEHICLE OWNER'S QUESTIONNAIRE (VOQ)

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM

OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4238

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