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Form Approved: O.M.B. No. 2127-0008



Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8333
DC METRO AREA (202) 386-0123
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.

CORRECT MARK: ●

FOR AGENCY USE ONLY

Date Received	Of or
Reference No.	id-rt
	id-rt
	sp-rt

OWNER INFORMATION (Type or Print) DAYTIME TELEPHONE NUMBER

NAME	STREET NO.	APT. NO.	ZIP CODE + 4	AREA CODE	
	PROVIDENCE	R1			
CITY	STATE	ENTER ZIP CODE			

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 and address to the vehicle manufacturer.

SIGNATURE OF OWNER: Scaplas - I GIVE MY AUTHORIZATION DATE: 3-22-04

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN)	VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
1Y1SK5285	CHEVROLET	PRISM		2001
VEHICLE MANUFACTURER	<input type="radio"/> BMW <input type="radio"/> Ford <input type="radio"/> Honda <input type="radio"/> Nissan <input type="radio"/> Subaru <input type="radio"/> Volvo <input type="radio"/> Other <input type="radio"/> Daimler/Chrysler <input checked="" type="radio"/> General Motors <input type="radio"/> Hyundai <input type="radio"/> Saab <input type="radio"/> Toyota <input type="radio"/> VW			
PURCHASE DATE	DEALER'S NAME	CITY	STATE	ZIP CODE
JULY - 01	PAUL MASSE CHEVROLET	EAST PROVIDENCE	RI	
ENGINE SIZE (CID/CC/L)	FUEL SYSTEM	FUEL TYPE	TRANSMISSION TYPE	ANTILOCK BRAKE
NO. CYLINDERS: 4	<input type="radio"/> Turbo <input checked="" type="radio"/> Fuel Injection	<input type="radio"/> Diesel <input checked="" type="radio"/> Gas	<input type="radio"/> Manual <input checked="" type="radio"/> Automatic	<input type="radio"/> Yes <input checked="" type="radio"/> No
VEHICLE TYPE		DOORS		BODY STYLE
<input checked="" type="radio"/> Front <input type="radio"/> 4-Wheel <input type="radio"/> Rear		<input type="radio"/> 2-Door <input checked="" type="radio"/> 4-Door		<input type="radio"/> Hatchback <input checked="" type="radio"/> Sedan <input type="radio"/> Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT <input type="radio"/> Child Seat <input type="radio"/> Electrical Lights & Alarms <input type="radio"/> Engine & Cooling System <input type="radio"/> Equipment <input type="radio"/> Fuel System, Exhaust <input type="radio"/> Heater, Defrost, Ventilation <input type="radio"/> Interior <input type="radio"/> Parking Brake <input type="radio"/> Power Train <input type="radio"/> Service Brakes <input checked="" type="radio"/> Steering <input type="radio"/> Structure <input type="radio"/> Suspension <input type="radio"/> Visual Systems <input checked="" type="radio"/> Other <u>TIRES</u> <u>CAR SKIDS ON TURNS</u>	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
	INCIDENT DATE	TIRE NAME	COMPLETE TIRE SIZE
	MILEAGE AT INCIDENT	TIRE BRAND	
	VEHICLE SPEED AT INCIDENT		
FAILED PART(S)	VEHICLE SPEED AT INCIDENT		
HANDICAPPED ADAPTIVE	FAILED PART(S) AVAILABLE?	NHTSA PREVIOUSLY CONTACTED?	
<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	

APPLICABLE INCIDENT INFORMATION

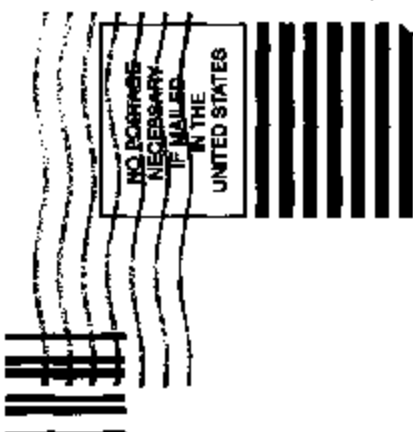
Please describe in detail the incident(s), failure(s), crash(es), and injury(es) on the back of this form	CRASH	NUMBER OF PERSONS INJURED	CAUSE OF INCIDENT	NORN TIRES	RESULT OF INCIDENT
	<input type="radio"/> Yes <input checked="" type="radio"/> No		<input checked="" type="radio"/> Worn/Corroded/Rust <input type="radio"/> Weak/Poor Fit/Lapses <input type="radio"/> Cut/Torn <input type="radio"/> Disconnect/Fall Off <input type="radio"/> Erratic/Poor Performance <input type="radio"/> Excessive Effort	<input type="radio"/> Nokay <input type="radio"/> Leaks <input type="radio"/> Short <input type="radio"/> Loose/Sticks/Grabs <input type="radio"/> Stability/Vibration <input type="radio"/> Broken	<input type="radio"/> Explosion/Fire <input checked="" type="radio"/> Loss of Control <input type="radio"/> Poor Visibility <input type="radio"/> Inadvertent Start <input type="radio"/> Rollover <input type="radio"/> Skids <input type="radio"/> Sudden Acceleration
	FIRE	NUMBER OF FATALITIES			
	<input type="radio"/> Yes <input checked="" type="radio"/> No				

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

- THE CAR SKIDS ON TURNS WHICH CAUSES LOSS OF CONTROL
- AFTER 21,000 MILES TIRES SHOW EXCESSIVE WEARING
- THE CAR WAS UNSAFE TO DRIVE AND NEEDED TIRES REPLACEMENT.

CONCERNED FIRST OWNER AND DRIVER -

PS. TIRES REPLACEMENT BILL INCLUDED - NO HELP FROM GMC!?



BUSINESS REPLY MAIL

FIRST-CLASS MAIL 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

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

Continue on additional page if necessary.
 Describe any additional incidents. (Include date and mileage)
 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.
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 HS Form 350 (Rev. 8/98)

Rec'd 2-25-04



VEHICLE OWNER QUESTIONNAIRE (V)

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

1-888-327-4236

DOT Auto Safety Hotline
 (DASH) 2 DOT

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



U.S. Department of Transportation
 National Highway Traffic Safety Administration

www.nhtsa.dot.gov/hotline

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**