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 1367

Date Received	Repository
2004 JUN 14 PM 4:55 03-MAY-2004	
	Reference No. 10072001

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
Address [redacted]		
City TYNGSBORO / State MA / Zip Co [redacted]	Evening Telephone Number	

Do you authorize NHT[redacted]ort to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an[redacted] provide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 5/11/04

VEHICLE INFORMATION

Vehicle Identification Number (Located at bottom of windshield on driver's side)	Make	Model	Model Year
1HD1FHW181Y622218	HARLEY DAVIDSON	FLHPI	2001

Date Purchased	Dealer's Name and Telephone Number	Engine: No. Cylinders	Fuel Type:
	NASHUA HARLEY DAVIDSON 603-578-9400		

Original Owner ☐	Dealer's City	State	Zip Code
	MERRIMACK	NH	03054

Transmission Type	☐ Antilock Brakes ☐ Cruise Control	Powertrain	Vehicle Component Code / Multiple Failure:
			115000 ELECTRICAL SYSTEM:FUSES AND CIRCUIT BREAKERS Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
03-MAY-2004			

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: DOTMALSA8C036)	☐ 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			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 CONTACTED 3 DEALERSHIPS TO MAKE AN APPOINTMENT TO HAVE THE CIRCUIT BREAKER RECALL 04V134000 REPAIRS PERFORMED. THEY ALL INDICATED THAT THEY DIDN'T KNOW WHEN THE PARTS WILL BE AVAILABLE, SO THEY COULDN'T GIVE THE CONSUMER AN APPOINTMENT.*JK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY