



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

Vehicle Owner's Report
Report Vehicle Defect
1-888-DASH-1111
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100145

Date Received: 05 JUN 2004
Repository:
Reference No.: 10075814

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: BUSHKILL State: PA Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]
E-mail Address: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner: [Redacted] Date: 6/2/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: [Redacted]
Make: SUZUKI Model: AERIO Model Year: 2003

Date Purchased: 8/6/2003 Dealer's Name and Telephone Number: ERTLE 570-421-4140
Engine: No. Cylinders: [Redacted] Fuel Type: [Redacted]

Original Owner: Dealer's City: STROUDSBURG State: PA Zip Code: 18360

Transmission type: Antilock Brakes: Powertrain: [Redacted]
 Cruise Control Vehicle Component Code: ZD1000 WHEELS:RIM
Multiple Failure: 3

FAILED COMPONENT(S) INFORMATION

Incident Date(s): 05 JUN 2004
Failure Speed: 12 mph
Failure Location: RT 611 between Stroodsbury and Hartonville

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R16): [Redacted]
DOT No. (Example: DOTM19ABC036): [Redacted] Original Equipment: Prior Repair:
Failure Location: RT 611 between Stroodsbury and Hartonville
Tire Component Code: [Redacted] Tire Failure Type: [Redacted]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)
Crash: Yes No
Fire: Yes No
Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: 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).

WHEN DRIVING OVER ANY TYPE OF BUMP OR POTHOLE IN THE ROAD ALUMINUM RIM BENT. THE PART WAS REPLACED TWICE, HOWEVER THE PROBLEM RECURRED. *AK

also reported to Consumer, BB, Suzuki Motor Corp.

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.

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

MANUFACTURER SHOULD NOT USE ALUMINUM ON RIMS AND CHARGE \$400.00 FOR REPLACEMENT, CARS USUALLY HAVE METAL. I HAD ONLY 3 TIRE FAILURES SINCE 1988 and they could be repaired or replaced for a small amount. WITH ROAD CONDITIONS NOW IT IS HARD TO AVOID POT HOLES.

I WANT TO MAKE SURE THAT THE PROBLEM IS WITH THE MANUFACTURER, THE DEALER WAS VERY NICE, REPAIRS DONE FAST.

I AM RETIRED AND DO NOT HAVE FINANCES TO PAY FOR SIMILAR ACCIDENTS, I ALSO HAD TO HAVE TOWING, RENT A CAR (FINALLY I MANAGED TO PICK UP MY CAR WITHOUT RENTAL) I MISSED APPOINTMENTS ETC, IT IS A HARD DEAL, AND DANGEROUS ON HIGHWAYS PLEASE TO CHECK WITH MANUFACTURER, THANKS

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

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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 75173 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, NVS-216
400 7th Street, SW
Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



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<http://www.nhtsa.dot.gov/odis>

**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).**