



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 100145

Date Received: 7/20/04
15 JUN 2004 19
Repository:
Reference No.: 10076230

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: SAINT AUGUSTINE State: FL Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
Evening Telephone Number: [REDACTED]

Do you authorize the manufacturer of your vehicle? YES NO
In the absence of a signature of owner, your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 7.2.04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: PLEASE FILL IN 5B4KP57G743 [REDACTED]
Make: R-VISION Model: TRAIL-LITE Model Year: 2000 → 2004
Date Purchased: 5-20-04 Dealer's Name and Telephone Number: DUSTY'S 7400 STATE RD CO EAST
Original Owner: [REDACTED] Dealer's City: BARTOW FL State: FL Zip Code: 33830 Engine: No: Cylinders: 8 Fuel Type: GAS
Transmission Type: AUTO Antilock Brakes Cruise Control Powertrain: [REDACTED] Vehicle Component Code: 16D00u STRUCTURE Multiple Failure: 1

FAILED COMPONENT (S)/PART(S) INFORMATION

Incident Date(s): 03-JUN-2004 Failure Mileage: 2000 Failure Speed: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]
DOT No. (Example: DOTMALSABC036): [REDACTED] Original Equipment Prior Repair Failure Location: [REDACTED]
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).

THE RV'S DASHBOARD IS GLUED TO THE MOUNTING BOARD. AS A RESULT, WHEN NEEDING TO USE THE HEADLIGHTS, THE DRIVER HAS TO DISASSEMBLE THE DASH PANEL. THE CAUSE HAS YET TO BE DETERMINED. PLEASE PROVIDE ADDITIONAL INFORMATION.

HEADLIGHT SWITCH & DIMMER SWITCH IS GLUED TO DASH BOARD FROM UNDERSIDE WHEN HEADLIGHTS WERE NEEDED TRYING TO TURN ON LIGHTS SWITCH FELL THROUGH DASH BOARD NO WAY TO TURN ON LIGHTS WHILE MOVING DOWN HWY (DEALER HAS SINCE MADE REPAIR)

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)

Lined area for narrative description of incident(s), failure(s), crash(es), and injury(ies).

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 72173 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
ON

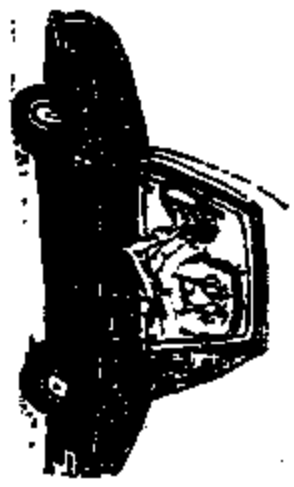
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.nhtsa.dot.gov/odotline>