



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 100184

Date Received
2004 JUN 15 PM 7:15
28-JUN-2004

Repository
Reference No.
10080046

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City FRIENDSWOOD State TX Zip Code [REDACTED]

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

Do you authorize NHTSA to provide your name and address to the manufacturer of your vehicle? YES NO
In the absence of a signature, provide your name or address to the vehicle manufacturer.
Signature of Owner [REDACTED] Date 7/6/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
4KTTS3925 [REDACTED] Make THOR Model TAHOE TRAMPOLINE TT Model Year 2002

Date Purchased 8-16-02 Dealer's Name and Telephone Number THOMPSON RV (713) 947-1008
Original Owner Dealer's City HOUSTON State TX Zip Code 77034
Engine: No. Cylinders Fuel Type:

Transmission Type Antilock Brakes Powertrain Vehicle Component Code 1B1000 TIRES:TREAD/BELT
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 26-JUN-2004 Failure Mileage 1000 Failure Speed 66

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make CARLISLE Tire Model (Name or Number) 900R20 Tire Size (Example P215/65R15) 225/75 R15
DOT No. (Example: DOTM189ABC036) DRCD75AEFS Original Equipment Prior Repair Failure Location: PASSENGER SIDE REAR
Tire Component Code 1B1000 TIRES:TREAD/BELT Tire Failure Type TREAD SEPARATION

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 Yes No Fire Yes No Number of Persons Injured 0 Number of Deaths 0 Reported to Police Y

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).

WHILE PULLING THE TRAILER AT 66 MPH CONSUMER FELT VIBRATION IN THE VEHICLE. THE TRAILER JACKED KNIFED, FLIPPED OVER, AND SEPARATED FROM THE TOWING VEHICLE. THE TRAILER DID MINOR DAMAGE TO THE TOWING VEHICLE. THERE WERE NO INJURIES. CONSUMER EXAMINED THE TRAILER AND FOUND THAT TIRE TREAD SEPARATED, CAUSING THE COLLISION. *AK

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices. 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.