



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100222

Date Received

01-SEP-2004

Repository ☐

Reference No.
10090234

OWNER INFORMATION (Type or Print)

Name

Address

City NORCO

State CA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to contact the manufacturer of your vehicle?
In the absence of an authorized signature, please provide your name or address to the vehicle manufacturer.
Signature of Owner

YES ☒ NO ☒
Date 11/18/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

4UZAAR881C

Make

TIFFIN

Model

ZEPHYR

Model Year

2001

Date Purchased

Dealer's Name and Telephone Number

Engine:

No. Cylinders

Fuel Type:

Diesel

Original Owner

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

131000 VISIBILITY: WINDSHIELD

Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
15-JUN-2004

Failure Mileage
26000

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

DOT No. (Example: DOTM19ABC036)

☐ 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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

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).

DRIVER'S SIDE WINDSHIELD WAS DEFECTIVE. CONSUMER WAS TOLD THE FIRST TIME TO HAVE THE WINDSHIELD REPAIRED AT NO COST. THAT WAS DONE, AND CURRENTLY THE WINDSHIELD WAS DEFECTIVE AGAIN. *AK

IT was repaired again, the manufacturer paid for it again.

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.