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 100247

Date Received	Repository
2005 JAN -5 PM 1:24 08-DEC-2004	Reference No. 10103376

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
[redacted]	[redacted]	
Address [redacted]	Evening Telephone Number	
City VICTORVILLE / State CA / Zip Code [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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner [redacted] Date 12/21/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
JS3TD62V424[redacted]	SUZUKI	XL-7	2002

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
	Victorville Hyundai Suzuki Isuzu (760)241-3801			No: Cylinders 8	
Original Owner ☐	Dealer's City Victorville	State CA	Zip Code 92392		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☐ Antilock Brakes ☐ Cruise Control	4 WHEEL DRIVE	106200 POWER TRAIN:AXLE ASSEMBLY:AXLE SHAFT Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
06-DEC-2004	2400	Moving from Stop to 5/8 inch	Broken Axle Shaft, but gear teeth looked good. Other half of axle shaft is still in vehicle and not visible.

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: DOTMAL9ABC036)	☐ 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	one	N	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 PURCHASED THIS VEHICLE ABOUT A MONTH AGO. SEVERAL DAYS AFTER PURCHASE SUSPENSION MALFUNCTIONED. VEHICLE WAS VERY DIFFICULT TO MANEUVER. THERE WAS AN INCIDENT WHERE CONSUMER CAME TO A 4 WAY STOP, AS THE VEHICLE WAS MAKING A RIGHT TURN, IT BROKE DOWN. THIS WAS DUE TO THE REAR AXLE SHAFT.*AK

I was told I could have the old parts, but when I went in to get them I was told that the parts are at the machine shop. I will still try to get the old parts, but who knows what they will tell me next.

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

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).