



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 100216

Date Received

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Repository

Reference No.
10117386

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City POMPANO BEACH State FL Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address

Evening Telephone Number

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 _____ Date ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
KLSVJ52 [REDACTED] Make SUZUKI Model VERONA Model Year 2004
Date Purchased Dealer's Name and Telephone Number KING SUZUKI 954-421-3330 Engine: No: Cylinders 6 Fuel Type:
Original Owner Dealer's City DEERFIELD BEACH State FL Zip Code 33441
Transmission Type Automatic Antilock Brakes Cruise Control Powertrain Vehicle Component Code 110000 ELECTRICAL SYSTEM Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 20-SEP-2004 Failure Mileage 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: DOTM18ABC038) 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 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).

NHTSA RECALL CAMPAIGN 04V398000 CONCERNING ENGINE STALLING. AFTER HAVING THE ELECTRONIC CONTROL MODULE REPROGRAMMED THE PROBLEM RECURRED. WHILE DRIVING AT ANY SPEED, VEHICLE STALLED. VEHICLE WAS TAKEN BACK TO THE DEALER FOR INSPECTION, BUT MECHANIC COULD NOT DUPLICATE THE PROBLEM. *AK

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.