



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

Date Received

10119312

Del. or  
rt. of  
od. rt  
up. ltr

Reference No.

OWNER INFORMATION (Type or Print)

Name

Street

Apt. No.

City HAYS,

State KS

Zip Co

Daytime Telephone Number

2005 APR 28 AM 7:40

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 4/14/05

## PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) 1DRF3227VB		Make KING OF THE ROAD		Model ROYALITE 5TH WHEEL RV		Year 1997	
Purchased Date 12-11-96		Dealer's Name HARPER CAMPERLAND				Engine Size (CID/CAL) <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used		Dealer's City GREAT BEND		State KS		Zip Code 67530	
Manufacture Date (on driver's door or pillar) 10-7-96		Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic		Restraint System <input type="checkbox"/> Driver's Side Air Bag <input type="checkbox"/> Passenger's Side Air Bag <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorized <input type="checkbox"/> 2-Point Belt		Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Drivetrain <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel		Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	
						Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other	

## FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) TIRES		Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear		Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement		Handicap Adaptive Equip <input type="checkbox"/> Yes <input type="checkbox"/> No	
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## TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand FIRESTONE LOAD RANGE E		Tire Name STEELTEX	
Complete Tire Size LT 215/85R16 M+S D14D		DOT No. DOT-VNOP65C-276	
No. of Failures 2		Date(s) of Failure(s) MARCH 19, 04 & MARCH 20, 04	
Mileage at Failure(s) NO ODOMETERS ON 5TH WHEEL RV'S		Failed Part(s) Available? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Vehicle Speed at Failure(s): ABOUT 60 MPH		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured 0		Number of Fatalities 0		Reported to Manufacturer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

WHILE DRIVING ALONG ON I-10 WEST OF LAS CRUCES, NM,  
A LEFT REAR TIRE BLEW OUT. THE NEXT DAY A SECOND  
TIRE ON THE SAME SIDE BLEW OUT. ON BOTH OF THEM  
THE TREAD HAD SEPARATED AND CAME OFF THE TIRE. I  
BOUGHT A NEW TIRE FOR \$127.34 AND A USED TIRE  
FOR \$35 PLUS TAX.

NOTE: DAMAGE TO LEFTSIDE OF RV ESTIMATE \$1461.22 BY  
RV DEALER WHERE WE BOUGHT THE RV.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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.

Mail postage free or fax to 202-368-7882