

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

- JULY 14, 2003 (MILEAGE WAS 5800 MILES ^{APPROX.}) - FIRE IN ENGINE AREA, CAUSE ??? (COST TO REPAIR \$44,000.00)
INJURY - SMOKE INHALATION - BOTH WENT TO HOSPITAL EMERGENCY.
- PISSES OUT DIESEL FUEL WHEN FILLING UP.

* MONACO IS NOT CONCERNED ABOUT SAFETY -- ONLY ABOUT SAVING MONEY NOT DOING PROPER RECALLS

MAY 18/05 - TALKED ^{PHONE} TO JD @ MONACO (TECHNICAL SUPERVISOR) @ INDIANA DEPT.

* WE SPOKE TO HIM A FEW TIMES -- WITH NO SATISFACTION OR HELP.

MAY 25/05 - TALKED ^{PHONE} TO ERIC (TECHNICAL ADVISOR) @ MONACO " " "

* ALSO SPOKE ^{PHONE} TO WALTER LOUIS ^{WHO} OVER SEES SAFETY RECALLS " " "
FOR BOSCH CALIPERS " " " "

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

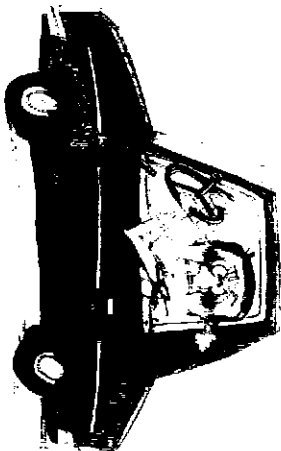
TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT
1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



US Department of Transportation
National Highway Traffic Safety Administration
www.nhtsa.dot.gov/hotline

July 14/03

BRITISH COLUMBIA
MOTOR VEHICLE TRAFFIC ACCIDENT
POLICE INVESTIGATION REPORT

PAGE OF PAGES 3-1	ACCIDENT CASE NUMBER 11 R-3328774	ORIGINAL ACN	POLICE FILE NUMBER 03-2474	21 41
----------------------	--------------------------------------	--------------	-------------------------------	-------

DATE OF ACCIDENT 03/07/14	DATE REPORTED 03/07/14	TIME (24 HOUR) 1017	1 <input type="checkbox"/> NON-REPORTABLE (DO NOT FORWARD TO M.V.D.)	2 <input checked="" type="checkbox"/> PROPERTY DAMAGE OVER \$1000.	3 <input checked="" type="checkbox"/> PERSONAL INJURY	5 <input type="checkbox"/> FATAL	6 <input type="checkbox"/> H & R	22 98
------------------------------	---------------------------	------------------------	---	--	---	----------------------------------	----------------------------------	-------

POLICE 1 <input checked="" type="checkbox"/> ATTENDED 2 <input type="checkbox"/> DID NOT ATTEND	POLICE CODE 02116	POLICE ZONE 21	LOCATION CODE 01971	CODE 1	1. PRIOR. INVT. 2. CITY/MUN. 3. RURAL	23 01
--	----------------------	-------------------	------------------------	-----------	---	-------

CITY, MUNICIPALITY, DISTRICT, VILLAGE OF: 100 Mile House	ACCIDENT LOCATION ON: Hwy #97 AT: Spring Lk Rd	OTHER	24 01
---	--	-------	-------

V <input type="checkbox"/> 01	P <input type="checkbox"/>	C <input type="checkbox"/>	99 <input type="checkbox"/>	N/A <input type="checkbox"/>	PO <input type="checkbox"/>	V <input type="checkbox"/>	P <input type="checkbox"/>	C <input type="checkbox"/>	99 <input type="checkbox"/>	N/A <input type="checkbox"/>	PO <input type="checkbox"/>	25 01
-------------------------------	----------------------------	----------------------------	-----------------------------	------------------------------	-----------------------------	----------------------------	----------------------------	----------------------------	-----------------------------	------------------------------	-----------------------------	-------

DRIVE	EXPIRY 07	CLASS 5/6	PROV. / STATE BC	DRIVER LICENCE NO.	EXPIRY	CLASS	PROV. / STATE	26 98
LAST NAME				FIRST NAMES				
ADDRESS				ADDRESS				
BUSINESS ADDRESS Whitford, BC				BUSINESS ADDRESS				
BUSINESS TELEPHONE				BUSINESS TELEPHONE				

BIRTHDATE 36/09/18	SEX M	VEH. COLOR WHI	BIRTHDATE	SEX	HOME TELEPHONE	VEH. COLOR	27 62	
PROV. / STATE BC	YEAR & VEH. MAKE 01 MONARO	VEH. STYLE MOTORH.	VEH. PLATE NO.	PROV. / STATE	YEAR & VEH. MAKE	VEH. STYLE	28 98	
TRAILER / TOWED VEH. PLATE NO.	PROV. / STATE	TRAILER / TOWED VEH. PLATE NO.	PROV. / STATE					29 02

OWNER NAME AND ADDRESS A/N.	OWNER NAME AND ADDRESS	29 98
--------------------------------	------------------------	-------

NATIONAL SAFETY CODE No.	JUR CODE	NATIONAL SAFETY CODE No.	JUR CODE	29 98
-----------------------------	----------	-----------------------------	----------	-------

				30 98
--	--	--	--	-------

DIRECTION OF TRAVEL NEWSIP	ON: Hwy #97	DIRECTION OF TRAVEL NEWSIP	ON:	31 99
-------------------------------	-------------	-------------------------------	-----	-------

SEVERITY 04	VEH. 1 DAMAGE \$ 10,000.	VEH. 2 DAMAGE \$	SEVERITY	32 98
----------------	-----------------------------	------------------	----------	-------

PRIMARY ACCIDENT OCCURRENCE																33 98	
CODE 99	BEAR END	HEAD ON	SIDE SWIPE	BACKING	INTERSECTION	OVERSIGHT	RIGHT TURN	RIGHT TURN	RIGHT TURN	RIGHT TURN	LEFT TURN	LEFT TURN	LEFT TURN	OFF ROAD RIGHT	OFF ROAD LEFT	ONE WAY STREET	OTHER ** EXPLAIN IN POLICE COMMENTS
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16		34 98

VEHICLE TOWED TO / BY BRIDGE LK TOWN	OTHER PROPERTY DAMAGE - DESCRIBE	VEHICLE TOWED TO / BY	35 98
---	----------------------------------	-----------------------	-------

<input checked="" type="checkbox"/> I.C.B.C.	POLICY NO.	<input type="checkbox"/> I.C.B.C.	POLICY NO.	36 98
<input type="checkbox"/> OTHER	COMPANY	<input type="checkbox"/> OTHER	COMPANY	
<input type="checkbox"/> NONE		<input type="checkbox"/> NONE		

CHARGES DR. 1	SECTION	SHORT TITLE	BTA OR BAC	CHARGES DR. 2	SECTION	SHORT TITLE	37 98
C M R B			DR. 1 DR. 2	C M R B			
C M R B			1 1	C M R B			
C M R B			2 2	C M R B			

TOTAL INJURED 2	TOTAL KILLED 0	TOTAL VEHICLES 1	37 98
--------------------	-------------------	---------------------	-------

10	11	12	13	14	15	16	17	18	19	20	NAMES OF INJURED - IF DECEASED INCLUDE DATE OF DEATH
A	01	01	05	01	66	M	06	99	01	HOSP	SON
B	01	03	05	01	63	F	06	99	01	HOSP	SON
C											
D											
E											
F											
G											

OFFICERS NAME LESLIE, B.L.	ID NO. 35805	SIFT TFC	DIVISION E	DATE SUBMITTED 03/7/14	REVIEWED BL.
-------------------------------	-----------------	-------------	---------------	---------------------------	-----------------

DRIVER COPY

**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).**