



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 100148

Date Received

Repository

27-JUN-2005  
2005 JUL 15 AM 4:11

Reference No.  
10126688

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City HORSESHOE BEND State AR 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 authorized signature, provide your name or address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 7/15/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
4YDF2762X4E [REDACTED] Make KEYSTONE Model COUGAR Model Year 2004

Date Purchased 09 FEB-04 Dealer's Name and Telephone Number HOLIDAY WORLD (713) 943-1331 Engine: No: Cylinders Fuel Type:

Original Owner  Dealer's City HOUSTON KATY State TX Zip Code 77494

Transmission Type  Antilock Brakes  Cruise Control Powertrain Vehicle Component Code 191000 TIRES:TREAD/BELT Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 30-AUG-2004  
25 JUNE 05 Failure Mileage Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make UNKNOWN MISSION Tire Model (Name or Number) UNKNOWN TRAVLER Tire Size (Example P215/65R15) 20575 R 15  
DOT No. (Example: DOTM19ABC036) WEUL27436030911 - BOTH  Original Equipment  Prior Repair Failure Location: DRIVER SIDE FRONT (PASSENGER FRONT)  
Tire Component Code 190000 TIRES Tire Failure Type OUT OF ROUND

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).

DT: WHILE INSPECTING THE TIRES THE OWNER NOTICED A BUBBLE IN THE RIGHT REAR TIRE. THEN THE OWNER REPLACED THE TIRE. THE TIRE MANUFACTURER REPLACED THE TIRE FOR FREE. THE TIRE HAD ABOUT 500 MILES ON IT AT TIME OF BULGE. ANOTHER TIRE ON THE FRONT RIGHT SIDE WENT BAD, AND SHOWED TREAD SEPARATION. UPON INSPECTING THE TIRES, OWNER NOTICED STEEL BELT THROUGH TREAD. THIS TIRE HAS ABOUT 11000 MILES ON IT. THE VEHICLE AND TIRES ARE INSPECTED PERIODICALLY. THE TIRE MANUFACTURER IS MISSION. \*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 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.