Form Approved O.M.B. No. 2127-0008

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-OCT-2005 (2005 NOV 29 PM 1:04)	
	Reference No. 10140921

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
Address		
City: BLOOMFIELD / State: NY / Zip Code: [redacted]	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 s[redacted]r address to the vehicle manufacturer.
Signature of Owner [redacted] Date 11/16/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
47CFDJS [redacted]	DUTCHMEN	TRAILER	2004

Date Purchased	Dealer's Name and Telephone Number	Engine: No: Cylinders	Fuel Type:
01-OCT-03	MYERS RV SUPERSTORE 866-240-2079		

Original Owner	Dealer's City	State	Zip Code
☒	CALEDONIA	NY	14423

Transmission Type		Powertrain	Vehicle Component Code
	☐ Antilock Brakes ☐ Cruise Control		191000 TIRES:TREAD/BELT Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
30-SEP-2005			

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
CARLISLE	CARLISLE	LT235/85R16

DOT No. (Example: DOTMAL9ABC036)		Failure Location:
3E0R	☒ Original Equipment ☐ Prior Repair	

Tire Component Code	Tire Failure Type
191000 TIRES:TREAD/BELT	BLOWOUT

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			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: THE CONTACT STATED WHILE USING THE TRAVEL TRAILER ONE OF THE TIRES BLEW OUT. APPROXIMATELY TWO WEEKS LATER, TWO OTHER TIRES BLEW OUT. THE TIRES HAVE NOT BEEN INSPECTED TO DETERMINE THE CAUSE OF THE FAILURE. THE TIRES WERE MANUFACTURED BY CARLISLE TIRE AND RUBBER CO, LT RADIAL. THE SERIAL NUMBERS WERE B36CDB80895, B36AAN0360, AND B36CDB80870. *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.

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

All three blowouts at speed less than 65MPH, TIRE Pressures Were at 80 pounds, NO signs of excessive wear, Contract has 2 of the 3 blown out tires Plus, the Fourth tire that Did NO blowout but Was changed. AT Present Time, Neither trailer Manufacturer OR sales Company Are taking responsibility For Defect, On-Line reports over internet reveal Over 1600 Incidents of tire failures by Carlisle tires on Camping trailers Photos of tires To be provided if REQUESTED.

ATTACH ADDITIONAL SHEETS IF NECESSARY.

U.S. Department of Transportation

National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use $300

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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

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DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

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and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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