



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

106 JAN 25 AM 9: 7
23 NOV 2005

Repository ☐

Reference No.
10143537

OWNER INFORMATION (Type or Print)

Name [REDACTED] Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Address [REDACTED]
City WEBSTER SPRINGS State WV Zip Code [REDACTED] Evening Telephone Number [REDACTED]

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 [REDACTED] Date 1/25/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JS3TX92VX24 [REDACTED] Make SUZUKI Model XL-7 Model Year 2002
Date Purchased 01-JUL-03 Dealer's Name and Telephone Number MICHAEL MOTORS Engine: No. Cylinders 6 Fuel Type: Gas
Original Owner ☐ Dealer's City SUTTON State WV Zip Code [REDACTED]
Transmission Type AUTOMATIC ☒ Antilock Brakes ☒ Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 121000 EXTERIOR LIGHTING:HEADLIGHTS
Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 01-NOV-2004 Failure Mileage [REDACTED] Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/85R15) [REDACTED]
DOT No. (Example: DOTM19ABC036) ☐ Original Equipment Prior Repair Failure Location: [REDACTED]
Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
Seat Type: [REDACTED] Installation System: [REDACTED]
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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 [REDACTED] Number of Deaths [REDACTED] 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: THE CONTACT STATED THE HEADLIGHT SOCKET BURNED THREE SEPARATE TIMES. THE VEHICLE HAS BEEN TO A MECHANIC, WHO DETERMINED THE SOCKET WAS TOO LIGHT TO HOLD THE HEAVY BULBS. THE SOCKET HAS BEEN REPLACED EACH TIME, BUT NO OTHER REPAIRS HAVE BEEN DONE. *AK

The sockets that was used was light Duty. We Replaced Light sockets with heavyduty sockets.

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 distilled summary thereof, may be used in support of the agency's action.

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

Replaced Light Sockets on 11/21/05 on this vehicle

B.T. TIRE Auto

Bush Chrysler owner



ATTACH ADDITIONAL SHEETS IF NECESSARY

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NAT'L 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

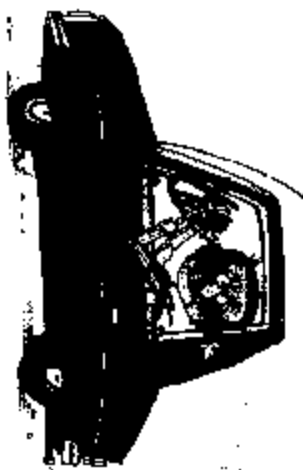
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



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Beckley Auto Mall

27-Point Inspection

CUSTOMER NAME: _____

MILEAGE: _____

VIN #: (Last 8)

Legend

- Pass

- Needs Future Attention

- Requires Attention Now

1. Emergency Brake Adjustment

2. Clutch Adjustment

3. Inspect Headlights (Operation and Adjustment)

4. Inspect Stop, Tail and Turn Signal Lights

5. Inspect A/C Pollen/Cabin Filter

6. Inspect Wiper Blades (includes rear)

7. Inspect Air Filter

8. Inspect Battery Cables

9. Inspect Hoses (Radiator and Heater)

10. Inspect Coolant

_____ F (Temperature Protection)

11. Inspect Engine Drive Belts (Condition & Adjustment)

12. Inspect Fluids (Oil, Trans., Brake, P/S, Washer) Level & Condition

13. Inspect Throttle Body

14. Inspect Clutch Hydraulic System

15. Inspect Brake Hydraulic System

16. Inspect Engine for Leaks

17. Inspect Transmission for Leaks

18. Inspect Struts/Shocks for Leaks

19. Inspect CV Boots/Joints

20. Inspect Front Brake Pads

_____ % (Approx. Remaining)

21. Inspect Muffler

22. Inspect Exhaust Pipes and Hangers

23. Inspect For Signs of Alignment Problems

24. Inspect Right Front Tire

Tread Depth: _____ /32

25. Inspect Left Front Tire

Tread Depth: _____ /32

26. Inspect Right Rear Tire

Tread Depth: _____ /32

27. Inspect Left Rear Tire

Tread Depth: _____ /32

Comments: _____

Date: _____

Customer Signature: _____

**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).**