



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
(1-888-327-4238)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY - 100148-

Date Received

Repository ☐

2004 FEB -7 AM 11:12
11-JAN-2006

Reference No.
10147474

OWNER INFORMATION (Type or Print)

Name

Address

City REDONDO BEACH

State CA

Zip Code

Daytime Telephone Number

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 answer, we will use your name or address to the vehicle manufacturer.
Signature of Owner Date 2/7/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

4S2CK5

Make

ISUZU

Model

RODEO

Model Year

1999

Date Purchased
21-JUL-99

Dealer's Name and Telephone Number
SANTA ANA ISUZU

Engine:

No. Cylinders 6

Fuel Type:

Gas

Original Owner
☒

Dealer's City
SANTA ANA

State
CA

Zip Code

Transmission Type
AUTOMATIC

☒ Antilock Brakes
☒ Cruise Control

Powertrain
REAR WHEEL DRIVE

Vehicle Component Code

038000 SERVICE BRAKES, HYDRAULIC:ANTILOCK

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
16-NOV-2005

Failure Mileage
40000

Failure Speed
25

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM18ABC096)

☐ Original Equipment
☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

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

0

Number of Deaths

0

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 THERE WAS A PROBLEM WITH THE ABS. WHILE DRIVING AT 25 MPH ON SLIPPERY ROADS ABS FAILED, CAUSING EXTENDED STOPPING DISTANCE. NHTSA RECALL CAMPAIGN 021002000 REGARDING THE ABS WAS ISSUED. THE PARTS NEEDED TO REPAIR THE VEHICLE WERE NOT AVAILABLE AT THE LOCAL DEALERSHIP. THE MANUFACTURER CONFIRMED THE PARTS WERE NOT AVAILABLE. THE VEHICLE WAS NOT INSPECTED. *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 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 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)

WHILE DRIVING ON MOUNTAINOUS ROADS, AND WOULD REQUIRE
EXTRA STOPPING DISTANCE, AFTER ROLLING OVER POTHOLES
AND OTHER ROUGH SURFACE CONDITIONS. THIS WOULD OCCUR
AT LOWER SPEEDS AS WELL. SEEMED TO OCCUR & BE
EXACERBATED AS ROADS BECAME STEEPER AND AT
CURVES. HAD BRAKES INSPECTED AND DETERMINED TO BE
DUE TO FAULTY AP MODULE. HAVE NO DOCUMENTATION
AS IT WAS GAS STATION SERVICE ATTENDANT'S OPINION.
SEEKED REPAIR BY ISUZU FACTORY TECH, BUT MODULE
WAS NOT AVAILABLE. ISUZU MUST GIVE NOTICE FIRST, BUT WAS
NOT BEEN MADE AVAILABLE FOR MY VEHICLE.

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 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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS

COMPLETE THIS FORM

OR

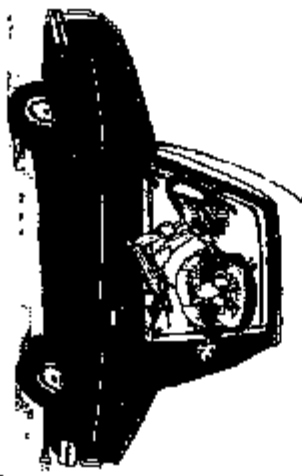
DASH2DOT

and dial toll free at

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