



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

706 MAY -3 AM 7:57
07 APR 2008

Reference No.
10154808

OWNER INFORMATION (Type or Print)

Name
Address
City SHELBY TOWNSHIP State MI 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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1JDCJ02R

Make JAYCO Model DESIGNER Model Year 1997

Date Purchased 01-APR-97 Dealer's Name and Telephone Number SOUTHLAND TRAILOR SALES 313-287-8566 Engine: No: Cylinders Fuel Type:

Original Owner Dealer's City TAYLOR State MI Zip Code 48180

Transmission Type Antilock Brakes Powertrain Vehicle Component Code 115000 ELECTRICAL SYSTEM:FUSES AND CIRCUIT BREAKERS
 Cruise Control Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 07-APR-2006 Failure Mileage Failure Speed 0

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: DOTM1A9ABC036) 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;
ie, parts repaired or replaced (and if old part is available).

DT*: THE CONTACT STATED THERE IS A RECALL, NHTSA CAMPAIGN NUMBER 98V122001 REGARDING THE FUSES AND CIRCUIT BREAKERS. THE VEHICLE IS NOT HAVING THE PROBLEMS ASSOCIATED WITH THIS RECALL. THE MANUFACTURER WAS ALERTED HOWEVER, THEY WERE UNABLE TO DETERMINE IF THE VEHICLE WAS INCLUDED IN THE RECALL.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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)

THE REPORTED PROBLEM HAS BEEN RESOLVED.
THANK YOU.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



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IN THE
UNITED STATES

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U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590

