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BUTLER PAPPAS
ATTORNEYS AT LAW

May 11, 2006

*COPY TO
DAD
5/24/06
GK*

National Highway Traffic Safety Administration
NHTSA Headquarters
400 Seventh Street, SW
Washington, DC 20590

Re: Dunlop SP381 Tires

Dear Sir/Madam:

On October 9, 2003, my client, [REDACTED], was involved in a catastrophic accident in Wakulla County, Florida. At the time of the accident, he was driving a 1988 Mack dump truck which had Dunlop SP381 front tires. Despite the fact that the Dunlop SP381 tires were purchased new and were on my client's vehicle for less than six months, the left front tire suffered a massive blowout, causing the accident. As a result, [REDACTED] suffered severe injuries and another driver, [REDACTED] died. Enclosed please find a copy of the Florida Highway Patrol's accident report. As you will note, the Florida Highway Patrol and its expert determined that the accident resulted from the aforementioned tire failure. My client's tire expert, Jon M. Crate, also determined that manufacturing defects caused the subject tire failure; a copy of Mr. Crate's report is enclosed for your review.

I pass on the foregoing information to you in the event that others have had similar problems with the Dunlop SP381 and so that the Administration can undertake the appropriate investigation to make sure that such failures do not happen again in the future.

*Memo
5/24/06*

BUTLER PAPPAS WEIHMULLER KATZ CRAIG LLP

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Mobile	3801 Airport Boulevard, P.O. Box 161389, Mobile, Alabama 36616	Telephone: (251) 338-3801	Facsimile: (251) 338-3805
Tallahassee	3600 Mealey Boulevard, Suite 101, Tallahassee, Florida 32312	Telephone: (850) 894-4111	Facsimile: (850) 894-4999
Tampa	One Harbour Place, 777 South Harbour Island Blvd., Suite 500, Tampa, Florida 33602	Telephone: (813) 281-1900	Facsimile: (813) 281-0900

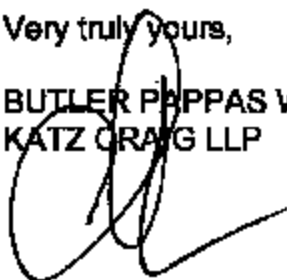
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National Highway Traffic Safety Administration
May 11, 2006
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Naturally, if you should have any questions regarding the enclosed or foregoing, please do not hesitate to contact me.

Very truly yours,

BUTLER PAPPAS WEIHMULLER
KATZ CRAIG LLP



CJN/lcy

Enclosures

DO NOT WRITE IN THIS SPACE

LONG FORM

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS, NEW YORKMAN BUILDING, TALLAHASSEE, FL 32309-0637

DATE OF CRASH		TIME OF CRASH		TIME OFFICER NOTIFIED		TIME OFFICER ARRIVED		INVEST. AGENCY REPORT NUMBER		HEAVY CRASH REPORT NUMBER	
10 09 03		7:10		7:17		7:41		FHPHQ3OFF008117		70015626	
COUNTY / CITY CODE		FEET or MILES		N S E W		CITY OR TOWN		(Check the City or Town)		COUNTY	
65/00		3.8		N S E W		ST. MARKS				WAKULLA	
AT NODE NO.		FEET or MILES		FROM NODE NO.		NEXT NODE NO.		NO OF LANES		ON STREET, ROAD OR HIGHWAY	
								2		SR-30- US 98	
AT THE INTERSECTION OF (Street, road or Highway)		FEET or MILES		N S E W		FROM INTERSECTION OF (Street, road or Highway)					
		1.3		N S E W		CR 59 - LIGHTHOUSE RD.					
DRIVER 1. Person ACTION		YEAR		MAKE		TYPE		VEH. LICENSE NUMBER		VEHICLE IDENTIFICATION NUMBER	
3		86		MACK		05 12				1M2T153Y4GM	
TRAILER OR TOWED VEHICLE INFORMATION				TRAILER TYPE							
				N/A							
VEHICLE TRAVELING		ON		AT		EST. MPH		Posted Speed		EST. VEHICLE DAMAGE	
N S E W		SR 30 US 98				55		60		\$10,000.00	
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER				VEHICLE REMOVED BY:		1. Year Rotation List 2. Driver 3. Tow Owner's Request 4. Other	
PROGRESSIVE EXPRESS				00482683				PARKWAY TOWING		2	
NAME OF VEHICLE OWNER (Check box if Same as Driver)				CURRENT ADDRESS (Number and Street)				CITY AND STATE		ZIP CODE	
LUBERTO'S SAND & STONE INC				PO BOX 519				EAST POINT, FL		32328	
NAME OF OWNER (Trailer or Towed Vehicle)				CURRENT ADDRESS (Number and Street)				CITY AND STATE		ZIP CODE	
N/A											
NAME OF MOTOR CARRIER (Commercial Vehicle Only)				CURRENT ADDRESS (Number and Street)				CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBER	
N/A										US 1 0 0 3 6 1	
NAME OF DRIVER (Take from Driver License) / PEDESTRIAN				CURRENT ADDRESS (Number and Street)				CITY, STATE AND ZIP CODE		DATE OF BIRTH	
APALACHICOLA, FLORIDA										10-22-75	
DRIVER LICENSE NUMBER		STATE		DL TYPE		REL. END.		ALCOHOL TEST TYPE		RESULTS	
		FL		B		2		1 Blood 2 Urine 3 Hairs 4 Breath 5 Random		5 N/A	
ALCOHOL TEST TYPE		RESULTS		ALCOHOL TEST TYPE		RESULTS		ALCOHOL TEST TYPE		RESULTS	
VEHICLE TRAVELING		ON		AT		EST. MPH		Posted Speed		EST. VEHICLE DAMAGE	
N S E W		SR 30 US 98				55		60		\$60,000.00	
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER				VEHICLE REMOVED BY:		1. Year Rotation List 2. Driver 3. Tow Owner's Request 4. Other	
CLARENDON NATIONAL INS.				TAP5075101				PARKWAY TOWING		2	
NAME OF VEHICLE OWNER (Check box if Same as Driver)				CURRENT ADDRESS (Number and Street)				CITY AND STATE		ZIP CODE	
WARE OIL SUPPLY CO. INC.				2715 S. BYRON BUTLER PARKWAY				PERRY, FL		32347	
NAME OF OWNER (Trailer or Towed Vehicle)				CURRENT ADDRESS (Number and Street)				CITY AND STATE		ZIP CODE	
SAME AS ABOVE											
NAME OF MOTOR CARRIER (Commercial Vehicle Only)				CURRENT ADDRESS (Number and Street)				CITY, STATE AND ZIP CODE		US DOT or ICC MC IDENTIFICATION NUMBER	
SAME AS ABOVE										US 3 5 3 5 1	
NAME OF DRIVER (Take from Driver License) / PEDESTRIAN				CURRENT ADDRESS (Number and Street)				CITY, STATE AND ZIP CODE		DATE OF BIRTH	
STEINHATCHEE FL.										07-25-48	
DRIVER LICENSE NUMBER		STATE		DL TYPE		REL. END.		ALCOHOL TEST TYPE		RESULTS	
		FL		A		2		1 Blood 2 Urine 3 Hairs 4 Breath 5 Random		5 N/A	
ALCOHOL TEST TYPE		RESULTS		ALCOHOL TEST TYPE		RESULTS		ALCOHOL TEST TYPE		RESULTS	
VEHICLE TRAVELING		ON		AT		EST. MPH		Posted Speed		EST. VEHICLE DAMAGE	
N S E W		SR 30 US 98				55		60		\$40,000.00	
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER				VEHICLE REMOVED BY:		1. Year Rotation List 2. Driver 3. Tow Owner's Request 4. Other	
CLARENDON NATIONAL INS.				TAP5075101				PARKWAY TOWING		2	
NAME OF VEHICLE OWNER (Check box if Same as Driver)				CURRENT ADDRESS (Number and Street)				CITY AND STATE		ZIP CODE	
WARE OIL SUPPLY CO. INC.				2715 S. BYRON BUTLER PARKWAY				PERRY, FL		32347	
NAME OF OWNER (											

FLORIDA TRAFFIC CRASH REPORT NARRATIVE/DIAGRAM

MAIL TO: DEPARTMENT OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS SECTION, 888 N. W. 11th AVE, TALLAHASSEE, FL 32304-0001

DO NOT WRITE IN THIS SPACE

TIME BMS NOTIFIED (FATALITIES ONLY) 7:15 ☒ AM ☐ PM	TIME BMS ARRIVED (FATALITIES ONLY) 7:30 ☒ AM ☐ PM	DATE OF CRASH 10 09 03	COUNTY / CITY CODE 65/00	INVEST. AGENCY REPORT NUMBER FHPH03OFF008117	NEW CRASH REPORT NUMBER 70015626
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(NARRATIVE)

Vehicle # 1 a dump truck was traveling West on SR 30 US 98. Vehicle # 2 a tractor/tanker was traveling East on SR 30 US 98. According to the witness for an unknown reason Vehicle # 1 went to the center of the roadway and traveled into the East bound lane and collided with Vehicle # 2, into the left side of the trailer. Vehicle # 1 began to rotate, flipping onto it's right side and landing at final rest in the middle of SR 30 US 98. Vehicle # 2 after the collision went to the South shoulder over turning and bursting into flames. Vehicle # 2 was also found in final rest up side down. Vehicle # 2's product was gasoline. As a result of the crash # 2 Driver Gary Allen Shapley 7-25-48 was killed instantly. (7:10 am). Responding agencies were the Wakulla Fire Dept., Wakulla Sheriffs Office, DEP, State Forestry, Wakulla EMS, FDOT. Next of Kin (wife) was notified 10:35 am, by Corporal Ruth Nalley FHP # 747 of Cross City District

Homicide Investigator- Corporal George Bedingfield # 941 #FHP 703-65-06

Photos taken by Wakulla S.O., Newspapers of the Wakulla News & Democrat (Tall). Video taken by WTXL & WCTV reporters on scene.

SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.
	N/A										
SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.
SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.
SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.
SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.
SEC#	PASSENGER'S NAME	CURRENT ADDRESS	CITY & STATE	ZIP CODE	DATE OF BIRTH	RACE	SEX	LOC	IN	S. BOUND	EXCT.

SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER
NONE				
SECTION #	NAME OF VIOLATOR	FL STATUTE NUMBER	CHARGE	CITATION NUMBER

WITNESS NAME (S) CURRENT ADDRESS CITY & STATE ZIP CODE WITNESS NAME (S) CURRENT ADDRESS CITY & STATE ZIP CODE

Thomas Everett PO BOX237 Hosford FL3234 850 379-3513

FIRST NO GIVEN BY - NAME

1. Physician or Nurse 2. Paramedic or EMT 3. Police Officer
4. Certified 1st Aider 5 Other

INURED TAKEN TO:

ST - NAME

WAKULLA EMS

2

TMH

WAKULLA RESCUE

WAS INVESTIGATION 1. YES ☒ 2. NO ☐	IF NO, THEN WHY?	DATE OF REPORT 10 09 03	REPORT TAKEN 1. YES ☒ 2. NO ☐	IF YES BY WHOM? 1. INVESTIGATING AGENCY ☒ 2. OTHER
---	------------------	----------------------------	---	---

INVESTIGATOR - NAME & SIGNATURE TPR W.W. LIDDELL JR.	INVESTIGATOR'S OFFICE NUMBER 0682/0590	DEPARTMENT FHP	FHP NO ☒ PD OTHER ☐
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FORM 90003 (Rev. 100)

Case Number FHP703-65-006 3

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North

Area of Collision

SR 30 (US 98)

FLORIDA TRAFFIC CRASH REPORT

☒ UPDATE

☐ CONTINUATION

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES, TRAFFIC CRASH
RECORDS, NEB KIRKMAN BUILDING, TALLAHASSEE, FL 32309-0000

DO NOT WRITE IN THIS SPACE

DATE OF CRASH 10 09 03	COUNTY / CITY CODE 65/00	INVEST. AGENCY REPORT NUMBER FHPH03OFF08117	HIGHWAY CRASH REPORT NUMBER 70015626
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DRIVER 1. Position ACTION 2. H & P 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	18 Underside 19 Overhead 20 Windshield 21 Tiller 22 Other
TRAILER OR TOWED VEHICLE INFORMATION								SHOW FIRST POINT OF IMPACT OF VEHICLE
VEHICLE TRAVELING N S E W								EST. VEHICLE DAMAGE 1. Dented 2. Functional 3. No Damage
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)								EST. TRAILER DAMAGE 1. Dented 2. Functional 3. No Damage
NAME OF VEHICLE OWNER (Check Box if Same As Driver)								1. Tow Station List 3. Driver
CURRENT ADDRESS (Number and Street)								2. Tow Owner's Request 4. Other
CITY AND STATE								ZIP CODE
NAME OF OWNER (Trailer or Towed Vehicle)								
CURRENT ADDRESS (Number and Street)								
CITY AND STATE								ZIP CODE
NAME OF MOTOR CARRIER (Commercial Vehicle Only)								
CURRENT ADDRESS (Number and Street)								
CITY, STATE AND ZIP CODE								
NAME OF DRIVER (Take From Driver License) / PEDESTRIAN								
CURRENT ADDRESS (Number and Street)								
CITY, STATE & ZIP CODE								DATE OF BIRTH
DRIVER LICENSE NUMBER								
STATE								
DL TYPE								
REG. END.								
ALCOHOL TEST TYPE 1 Blood 2 Urine 3 None 4 Breath 5 Postmortem								
RESULTS								
ALCOHOLIC INTOX. DEF.								
AGE								
RACE								
SEX								
HGT.								
WGT.								
EYES								
HAIR								
SCAR								
EJECT.								
HUMAN REMAINS TRANSPORTED								
PLACARDS								
IF YES INDICATE NAME OF FOUR SPOT NUMBER FROM TOP OF PLACARD OR BOX ON PLACARD AND LIST NUMBER FROM BOTTOM OF DAMAGED								
HUMAN REMAINS MATERIAL SPILLED								
IF YES EXPLAIN IN NARRATIVE								
DRIVER'S PHONE NO.								

DRIVER 1. Position ACTION 2. H & P 3. N/A	YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	18 Underside 19 Overhead 20 Windshield 21 Tiller 22 Other
TRAILER OR TOWED VEHICLE INFORMATION								SHOW FIRST POINT OF IMPACT OF VEHICLE
VEHICLE TRAVELING N S E W								EST. VEHICLE DAMAGE 1. Dented 2. Functional 3. No Damage
MOTOR VEHICLE INSURANCE COMPANY (LIABILITY OR PIP)								EST. TRAILER DAMAGE 1. Dented 2. Functional 3. No Damage
NAME OF VEHICLE OWNER (Check Box if Same As Driver)								1. Tow Station List 3. Driver
CURRENT ADDRESS (Number and Street)								2. Tow Owner's Request 4. Other
CITY AND STATE								ZIP CODE
NAME OF OWNER (Trailer or Towed Vehicle)								
CURRENT ADDRESS (Number and Street)								
CITY AND STATE								ZIP CODE
NAME OF MOTOR CARRIER (Commercial Vehicle Only)								
CURRENT ADDRESS (Number and Street)								
CITY, STATE AND ZIP CODE								
NAME OF DRIVER (Take From Driver License) / PEDESTRIAN								
CURRENT ADDRESS (Number and Street)								
CITY, STATE & ZIP CODE								DATE OF BIRTH
DRIVER LICENSE NUMBER								
STATE								
DL TYPE								
REG. END.								
ALCOHOL TEST TYPE 1 Blood 2 Urine 3 None 4 Breath 5 Postmortem								
RESULTS								
ALCOHOLIC INTOX. DEF.								
AGE								
RACE								
SEX								
HGT.								
WGT.								
EYES								
HAIR								
SCAR								
EJECT.								
HUMAN REMAINS TRANSPORTED								
PLACARDS								
IF YES INDICATE NAME OF FOUR SPOT NUMBER FROM TOP OF PLACARD OR BOX ON PLACARD AND LIST NUMBER FROM BOTTOM OF DAMAGED								
HUMAN REMAINS MATERIAL SPILLED								
IF YES EXPLAIN IN NARRATIVE								
DRIVER'S PHONE NO.								

PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

WITNESS NAME (1)	CURRENT ADDRESS	CITY & STATE	ZIP CODE	WITNESS NAME (2)	CURRENT ADDRESS	CITY & STATE	ZIP CODE
WAS INVESTIGATION MADE AT SCENE? 1. YES ☒ 2. NO ☐ IF NO, THEN WHERE? ☐ IS INVESTIGATION COMPLETE? 1. YES ☒ 2. NO ☐							
INVESTIGATION - NAME & SIGNATURE Cpl. George W. Beddingfield, Jr.				DATE OF REPORT 12 10 03			
INVESTIGATOR'S NUMBER 1204-941				PHOTOS TAKEN 1. YES ☒ 2. NO ☐ IF YES BY WHOM? 1. INVESTIGATING AGENCY ☒ 2. OTHER ☐			
DEPARTMENT FLORIDA HIGHWAY PATROL				FHP ☒ SO ☐ PD ☐ OTHER ☐			

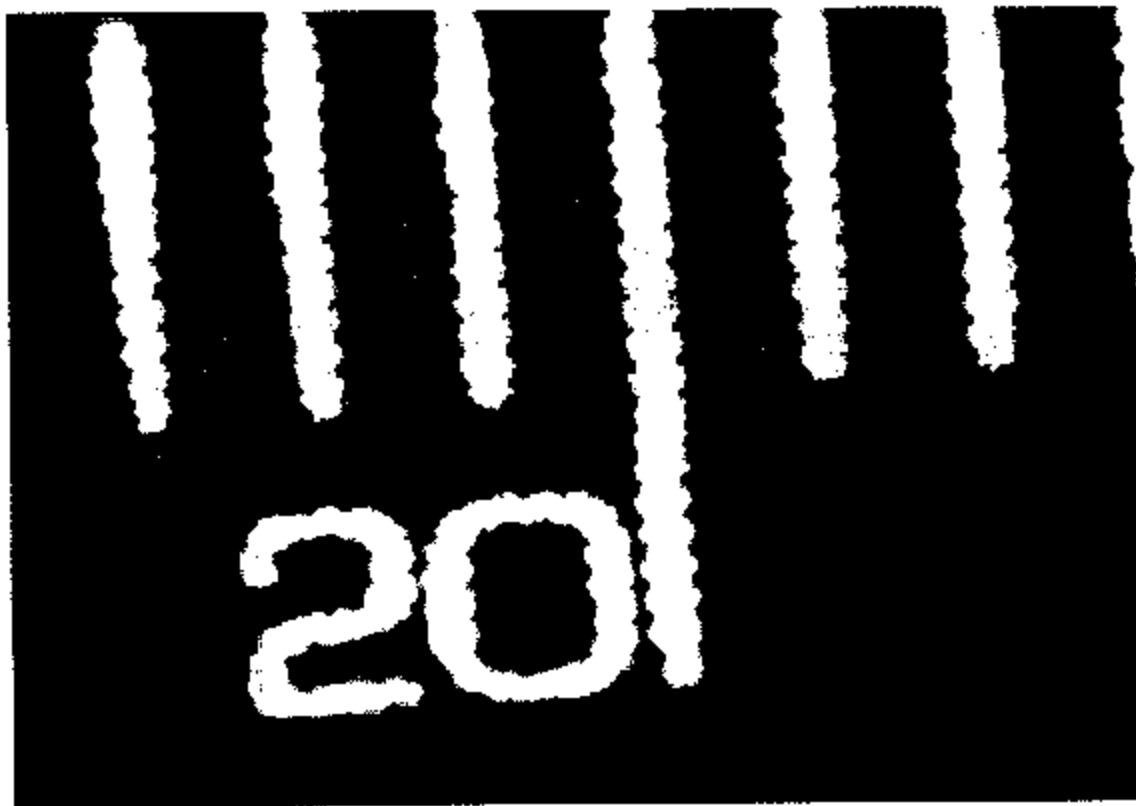


Figure 1: Microscope Photograph M1-8: Millimeter Ruler for Calibration of Image Magnification (20 X Optical = 21.5 X Printed Magnification).

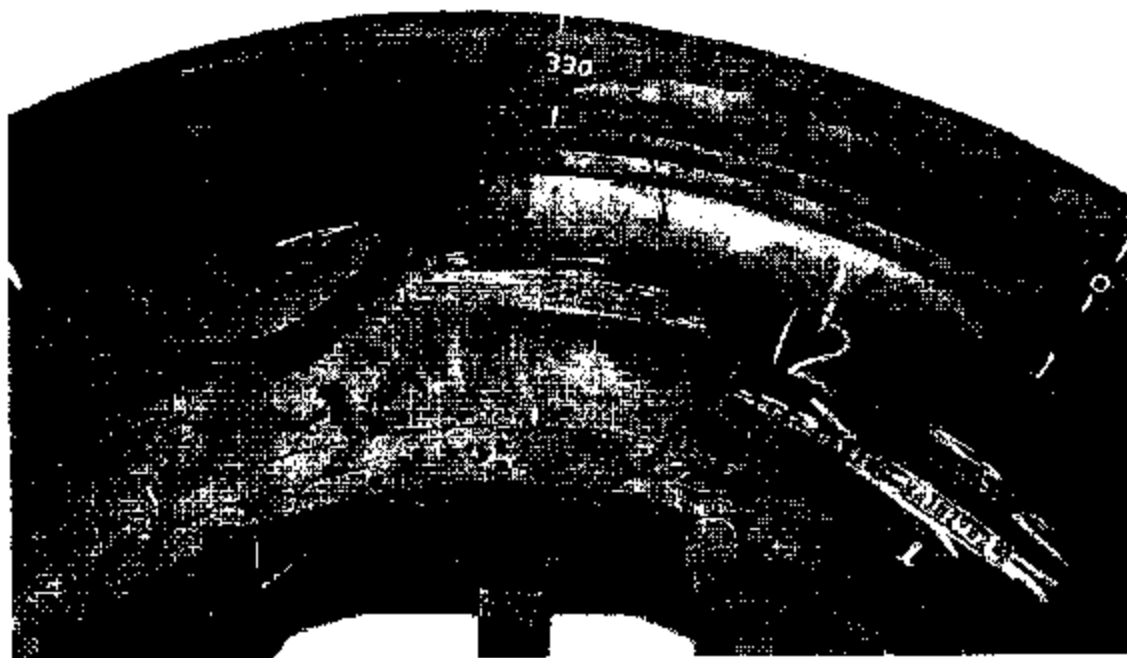


Figure 2: Photo C1-24: Failed Tire Sidewall From 300° to 0° on the DOTS.



Figure 3: Photo C2-14: Failed Tire Sidewall and Bead From 240° to 290° on the NDOTS

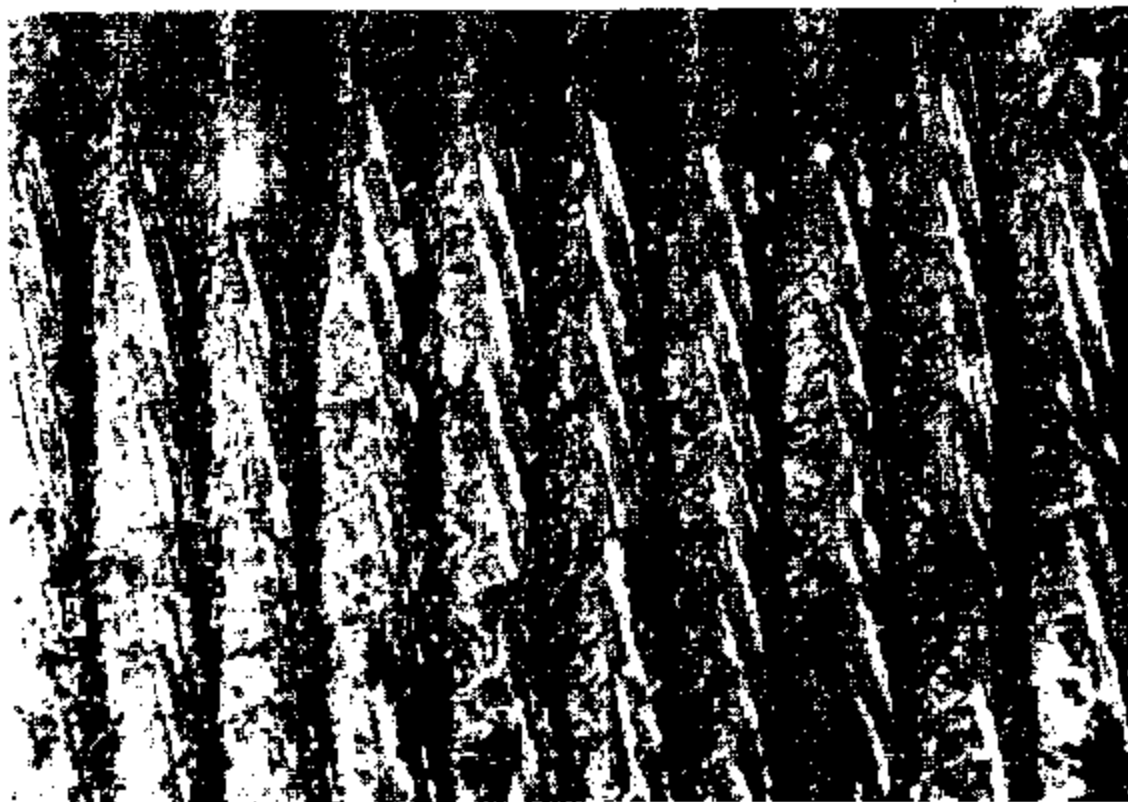


Figure 4: Microscope Picture M1-19: Poor Consolidation and Adhesion of Rubber in Bead at Radial Ply Interface at 250° NDOTS. Optical Magnification 20 X = Printed Magnification 21.5 X



Figure 5: Microscope Picture M1-10: Fracture Surface Showing Sockets From Ends of Radial Ply Cords at 250° NDOTS With Fatigue Beach Marks Surrounding. Optical Magnification 20 X - Printed Magnification 21.5 X.

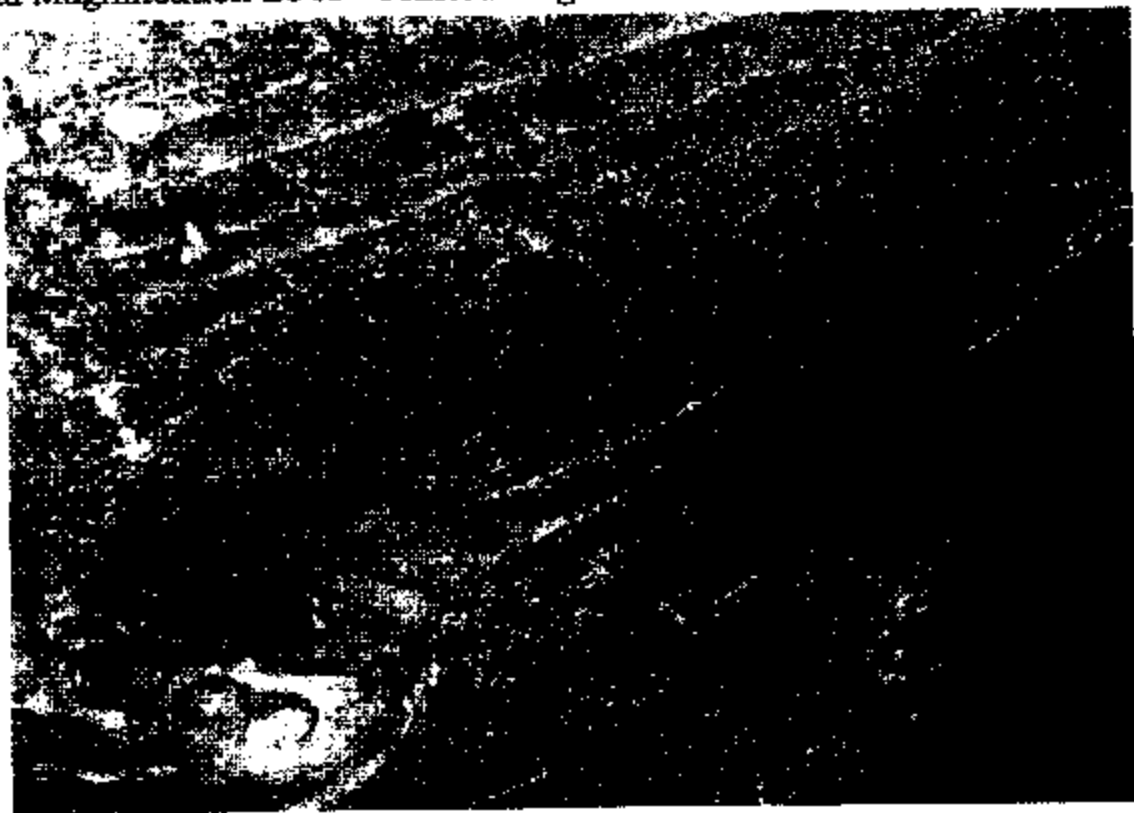


Figure 6: Microscope Picture M1-17: Fracture Surface Adjacent to Interface Between Bead and Radial Ply at 250° NDOTS. Optical Magnification 7 X = 7.5 X Printed.

Findings (Continued)

Table 1: Failed Tire Tread Depth Chart: Luberto Sand & Stone Dunlop SP 381, DOT #: DA4F-MA1W2902 (All measurements in thirty-seconds of an inch by traditional method)						
Degree Location	DOTS Shoulder Groove	DOTS Main Groove	DOTS Central Groove	NDOTS Central Groove	NDOTS Main Groove	NDOTS Shoulder Groove
0	7.0	10.0	10.0	11.5	13.0	13.0
15	7.0	10.0	10.5	11.0	13.5	13.0
30	6.0	9.5	10.0	11.0	13.0	12.0
45	4.5	9.0	9.5	9.5	12.5	11.5
60	5.0	9.0	9.5	11.0	12.5	11.5
75	5.0	9.0	9.0	10.5	12.0	11.5
90	6.0	9.0	9.0	10.0	11.5	11.0
105	5.0	9.0	9.0	10.0	11.5	11.0
120	5.5	8.5	9.0	10.0	12.0	11.0
135	5.5	9.0	9.0	10.0	11.5	11.5
150	5.0	9.0	9.0	10.0	12.0	11.5
165	6.0	8.5	9.0	10.0	12.0	11.0
180	7.0	9.0	9.0	10.0	11.0	11.5
195	6.0	9.0	9.0	10.5	12.0	11.5
210	6.0	9.0	9.0	10.5	12.0	12.0
225	5.0	9.0	9.0	10.5	12.0	11.5
240	4.5	9.0	10.0	10.5	12.0	11.5
255	4.5	9.0	10.0	10.5	12.0	11.0
270	4.0	9.0	9.5	10.5	12.0	11.0
285	4.5	9.5	9.5	10.5	12.5	11.5
300	4.5	9.0	9.5	11.0	13.0	11.5
315	5.5	9.0	10.0	10.0	12.0	12.0
330	6.0	10.0	9.5	10.5	13.0	12.0
345	6.5	9.5	10.0	11.0	13.0	12.0
Average	5.48	9.15	9.44	10.44	12.23	11.60
Statistics	Grand Average	Standard Deviation	One SD Below Mean	Two SD Below Mean	Maximum Reading	Minimum Reading
	9.72	2.27	7.45	5.18	13.5	4.0
Calibration Check						
0.450 Standard Reads		14.5	0.050 Standard Reads		1.5	
Name:				Date: 4/17/2006		

Findings (Continued)

Table 2: Luberto Sand & Stone						
Dunlop SP381 DOT: DA4F-MA1W2902						
Durometer Type A Hardness per ASTM D-2240-02						
Degree	DOTS			NDOTS		
Location	Bead	Sidewall	Tread	Bead	Sidewall	Tread
0	82	61	62	82	62	62
60	83	61	63	83	63	61
120	82	62	62	83	62	62
180	82	61	62	83	63	62
240	82	61	62	82	63	62
300	82	61	61	83	63	62
Average	82.2	61.2	62.0	82.7	62.7	61.8
Std Dev	0.4	0.4	0.6	0.5	0.5	0.4
Bead Average	82.4	Sidewall Average	61.9	Tread Average	61.9	
Calibration Check Type A Durometer						
PTC Model 408 Serial # 07124			A-78 Standard Reads:		78	
Name:			Date:		4/15/2008	

Conclusions

Internal flaws were present from the time the tire was manufactured which ultimately led to the failure of the tire. Incomplete consolidation and the resulting inadhesion between the steel belt comprising the radial body ply and the bead components caused an internal separation which continued to grow larger with time and use due to the high cycle fatigue tires are subjected to in normal use.

Tire abuse, impact and overloading were eliminated from being contributing factors to the failure since none of the characteristic evidences consistent with these factors were present.

To protect the privacy of individuals, NHTSA does not make medical records available to the public without authorization. For this reason, documents falling into this category have not been included in this complaint record.