



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

30-MAY-2006

Reference No.
10158570

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City CONROE State TX 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 6/18/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
4UZ5XBC8 _____ Make FLEETWOOD Model DISCOVERY Model Year 1999
Date Purchased 10-FEB-00 Dealer's Name and Telephone Number _____ Engine: No: Cylinders 6 Fuel Type: Diesel
Original Owner Dealer's City _____ State _____ Zip Code _____
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain REAR WHEEL DRIVE Vehicle Component Code 350000 EQUIPMENT Multiple Failure: 6

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 30-MAY-2006 Failure Mileage 99000 Failure Speed _____

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: DOTM19ABC036) 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(es).)

Crash Yes No Fire Yes No Number of Persons Injured _____ Number of Deaths _____ Reported to Police N

Narrative Description of Incident(s), Crash(es), and Injury(es).
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 SIX TIRE MINDERS PURCHASED TO MONITOR THE AIR PRESSURE ON A FLEETWOOD DISCOVERY MOTOR HOME ARE DEFECTIVE. THERE WAS AN INDICATOR ON THE TIRE MINDER THAT SHOULD HAVE TURNED YELLOW IF THE PRESSURE WAS DOWN. THE INDICATOR STAYED BLACK INDICATING THE PRESSURE WAS GOOD. UPON RETURNING FROM AN EXTENDED TRIP, THE CONTACT CHECKED THE AIR PRESSURE ON THE TIRES; THE PRESSURE WAS ONLY AT 40-60 POUNDS. THE RECOMMENDED PRESSURE WAS 110 POUNDS. THE DEALER INFORMED THE CONTACT THERE HAD BEEN SEVERAL PROBLEMS WITH THIS PART AND THEY HAD CONTACTED THE MANUFACTURER WHICH IS MINDER RESEARCH CORPORATION.

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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.