



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  
27 APR 12 AM 7:41  
22-FEB-2007

Repository   
Reference No.  
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**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City MECHANICSVILLE State MD Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]  
Evening Telephone Number [REDACTED]  
E-mail Address [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 \_\_\_\_\_ Date 1/1

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
4MZAAX14T653 [REDACTED]  
Make BUELL Model XB12R Model Year 2005  
Date Purchased 09-JUN-05 Dealer's Name and Telephone Number BALTIMORE HARLEY DAVIDSON 410-238-2003 Engine: No: Cylinders 2 Fuel Type: Gas  
Original Owner  Dealer's City BALTIMORE State MD Zip Code [REDACTED]  
Transmission Type  Antilock Brakes Powertrain REAR WHEEL DRIVE Vehicle Component Code 121000 EXTERIOR LIGHTING:HEADLIGHTS  
MANUAL  Cruise Control Multiple Failure: 2

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 01-JUL-2006 Failure Mileage 4800 Failure Speed [REDACTED]  
Headlights - Poor Lighting

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]  
DOT No. (Example: DOTM9ABC036)  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 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).

TL\*- THE CONTACT STATED THAT THE 2005 BUELL XB12R MOTORCYCLE REFLECTIVE COATING AND LIGHT LENSES DEGRADING DUE TO HEAT AND POOR MATERIALS. THE CONTACT STATED THAT ONCE DEGRADATION BEGAN THE LIGHT OUTPUT WAS SERIOUSLY DIMINISHED. THE LIGHT ASSEMBLY HAS BEEN REPLACE DONCE UNDER WARRANTY ON 06/2006. THE MANUFACTURER WAS AWARE OF THIS DEFECT, BUT CONTINUED TO REPLACE THE LIGHTS WITH THE SME UNITS THAT HAVE BEEN FAILING. WHILE DRIVING AT NIGHT HE HAD DIFFICULTY SEEING THE ROAD IN FRONT OF HIM DUE TO THESE HEADLIGHTS ON THE MOTORCYCLE. THE FAILURE MILEAGE WAS 4800, AND THE CURRENT MILEAGE WAS 5600.\*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.