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

2007 AUG 24 AM 8:43

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
	Reference No. 10199507

OWNER INFORMATION (Type or Print)

Name		Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	[redacted]
City: NEWPORT CENTER	State: VT	Zip Code: [redacted]	Evening Telephone Number: [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 au[redacted]vide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 8/20/07

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
WDXPF445979[redacted] CAMPING	ITASCA	NAVION	2008

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
27-JUN-07	~~KEPPLE~~ WORLD OF SYRACUSE	No. Cylinders 6	Diesel

Original Owner	Dealer's City	State	Zip Code
☒	SYRACUSE	NY	

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	120000 EXTERIOR LIGHTING Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
28-JUN-2007		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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 OWNS A 2008 ITASCA NAVION. THE CONTACT STATED THAT THE HEADLIGHTS AND TAIL LIGHTS REMAIN ILLUMINATED, MAKING IT DIFFICULT FOR THE DRIVER'S BEHIND HIM TO SEE HIS BRAKE LIGHTS DURING THE DAY. THE DEALER STATED THAT THEY WILL NOT CHANGE THE VEHICLE'S DESIGN. THE CURRENT MILEAGE WAS 2,000 AND THE FAILURE MILEAGE WAS UNKNOWN.

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