



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

2008 MAR -4 PM 2:37

12-DEC-2007

Reference No.

10211594

OWNER INFORMATION (Type or Print)

Name

Address

City

PORT RICHEY

State

FL

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 a copy of this report to the vehicle manufacturer.

Signature of Owner

Date 12/18/07

VEHICLE INFORMATION

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

J44MWS31R32

Make

MITSUBISHI

Model

MONTERO XLS

Model Year

2002

Date Purchased
01-OCT-02

Dealer's Name and Telephone Number

Engine:

No: Cylinders

Fuel Type:

Gas

Original Owner

Dealer's City

DOYLESTOWN PA

State

PA

Zip Code

18901

6

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

033200 SERVICE BRAKES, HYDRAULIC:POWER ASSIST:HYDRAULIC

Multiple Failure: 10

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
01-DEC-2007

Failure Mileage
80000

Failure Speed
35

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 (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 OWNS A 2002 MITSUBISHI MONTERO. WHEN THE VEHICLE WAS STARTED AND THE BRAKE WAS APPLIED AT APPROXIMATELY 35 MPH, THE CONTACT HEARD A METAL SOUND. THE REPAIR SHOP REPLACED THE HYDRAULIC BOOST ASSEMBLY. THE MANUFACTURER STATED THAT THE VIN WAS NOT INCLUDED IN NHTSA CAMPAIGN ID NUMBER 01V254001 (SERVICE BRAKES, HYDRAULIC:POWER ASSIST:VACUUM). THE VIN, NUMBER OF CYLINDERS, AND ENGINE SIZE WERE UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE 80,000.

OLD PART # 32P00110230137

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

*While backing out of garage on an incline
I had to really pump hard on brakes to stop*

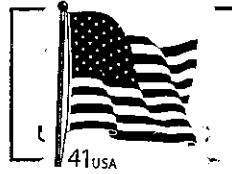
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

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



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

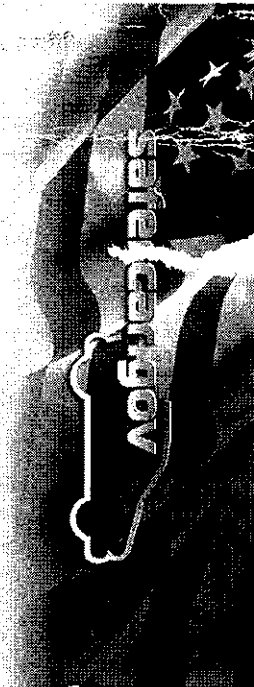
or call:

Vehicle Safety Hotline

888-327-4236



Vehicle Owners Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration



MORRISON' DISCOUNT AUTOMOTIVE REPAIR

12214 U.S. HWY. 19, NORTH
Hudson, FL. 34667

Phone - 727-861-5477 Fax - 727-869-7200

Visit or website at WWW.MORRISONSDISCOUNTAUTOREPAIR.COM

INVOICE

8321

Org. Est. # 015713
MV #55689

INVOICE

Print Date : 11/30/2007

Port Richey, FL
Cellular
Cust ID : 330

2002 Mitsubishi - Montero Limited
3.5L, V6, VIN (R)
Lic # :
Unit # :
Vin # :
Hat # :
Odometer In : 80000

Ref # :

Part Description / Number	Qty	Sale	Extended	Labor Description	Extended
HYDRAULIC BRAKE UNIT				CUSTOMER REQUEST HYDRAULIC BRAKE	
NA	1.00	1,018.00	1,018.00	UNIT.	
BRAKE LABOR				CUSTOMER WILL PRE PAY FOR REPAIR	
NA	1.00	100.00	100.00	AND WILL INSTALL WHEN PART COMES IN.	

[Technicians : Please Select, Technician]

Org. Estimate	\$1,196.26	Revisions	\$0.00	Current Estimate	\$ 1,196.26	Additional Cost	Revised Estimate	Labor:	\$0.00
								Parts:	\$1,118.00
								Sublet:	\$0.00
								Sub:	\$1,118.00

								Tax:	\$78.26
								Total:	\$1,196.26
								Bal Due:	\$0.00

[Payments - MasterCard - \$1196.26]

NOTE: Have wheels tighten, after 100 miles, if where removed

Warranty:
 12 month/12,000 miles (which ever occurs first)
 90 days/3,000 miles (which ever occurs first)
 No warranty

I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate vehicle inspection. An express mechanics lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. Warranty for this work performed is stated above. Warranty work has to be performed in our shop & cannot exceed the original cost of repair.

SIGNATURE..... Date..... Time.....

Written By: <none>