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

2008 JAN 14 AM 7:20

FOR AGENCY USE ONLY 100148

Date Received	Repository
18-DEC-2007	☐

Reference No. 10212238

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
[redacted]	[redacted]	[redacted]

Address	Evening Telephone Number
[redacted]	SAME

City	State	Zip Code
FLUSHING	MI	[redacted]

Do you authorize NH[redacted] manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an [redacted] our name or address to the vehicle manufacturer.

Signature of Owner [redacted] Date 1/2/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FCMF53S12[redacted]	FORD	MOTOR HOME	2002

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
11/15/04	GENERAL RV 1-248-349-0900 ~~813-685-5900~~	No: Cylinders 8	Gas

Original Owner	Dealer's City	State	Zip Code
☐	WIXOM	MI	48393

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	REAR WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 0

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
14-DEC-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 2002 FORD MOTOR HOME. THE CONTACT RECEIVED A RECALL NOTICE FOR NHTSA CAMPAIGN ID NUMBER 07V336000 (VEHICLE SPEED CONTROL). THE PART WAS UNAVAILABLE. THERE HAD BEEN NO FAILURE TO DATE. THE ENGINE SIZE AND PURCHASE DATE WERE UNKNOWN. THE CURRENT MILEAGE WAS 20,771.

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