



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-2-4000
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

03-APR-2008

Reference No.
10223288

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: MESA State: AZ Zip Code: [REDACTED]

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: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3FCMF53G5VJ [REDACTED]
Make: REXHALL Model: AERBUS Model Year: 1997
Date Purchased: _____ Dealer's Name and Telephone Number: _____ Engine: No: Cylinders 8 Fuel Type: Gas
Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Powertrain: UNKNOWN Cruise Control
Vehicle Component Code: 185000 VEHICLE SPEED CONTROL: CRUISE CONTROL
Multiple Failure: 0

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 15-SEP-2007 Failure Mileage: _____ Failure Speed: 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: 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 1997 REXHALL AERBUS. THE CONTACT RECEIVED A RECALL NOTICE FOR THE VEHICLE SPEED CONTROL: CRUISE CONTROL IN SEPTEMBER OF 2007. THE CRUISE CONTROL WAS DISCONNECTED IN OCTOBER OF 2007. THE CONTACT CALLED THE DEALER TWICE AND WAS INFORMED THAT THE PART WAS UNAVAILABLE. THERE HAD BEEN NO FAILURE TO DATE. THE PURCHASE DATE, POWERTRAIN, AND RECALL NUMBER WERE UNKNOWN. THE CURRENT MILEAGE WAS 60,000.

*Recall # 05828
Just want my part to repair this.*

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.