



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

29-APR-2008
2008 MAY 19 AM 7:38

Reference No.
10226066

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
 Address: [REDACTED]
 City: MARIANNA State: FL Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] 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: [REDACTED] Date: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: JS1V555A862 [REDACTED]
 Make: SUZUKI Model: VL800 Model Year: 2006
 Date Purchased: 4/24/07 Dealer's Name and Telephone Number: DOTHAN POWER SPORTS 334-793-7834
 Engine: No. of Cylinders: 2 Fuel Type: GAS
 Original Owner: Dealer's City: DOTHAN ALA State: AL Zip Code: 36301
 Transmission Type: Antilock Brakes Cruise Control Powertrain:
 Vehicle Component Code: 070000 FUEL SYSTEM, GASOLINE
 Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 20-MAR-2008 Failure Mileage: 3200 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 2006 SUZUKI VL800/C. WHEN THE GAS TANK IS ~~RE~~ AND THE VEHICLE IS LEANING TO EITHER SIDE, FUEL LEAKS OUT OF THE VEHICLE. THE VEHICLE WAS DIAGNOSED BY THE DEALER AND THEY STATED THAT THE VEHICLE WAS MANUFACTURED IN THAT MANNER. THE FAILURE MILEAGE WAS 3,200. TANK DOES NOT HAVE TO BE FULL, IF BIKE GOES DOWN, SPARKS ARE GOING OFF & GAS IS LEAKING FROM THE FILLER CAP, SOUNDS LIKE A FIRE WAITING TO HAPPEN, OTHER BIKES HAVE A CHECK VALVE, TO SOLVE THIS PROBLEM, SPARKS & GAS MEAN FIRE, IM JUST TRYING TO STOP A RIDER FROM CATCHING FIRE

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 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)

THE OTHER PROBLEM IS THE FILLER NECK IN THE BIKE
THE DAY AFTER I BOUGHT THE BIKE, I STOPPED TO FILL UP
WHEN I LEFT I GOT A FACE & CHEST FULL OF FUEL, I TOOK A
RAG & GOT SOME OF THE GAS OUT OF THE TANK & WAS OK, NO
WORNING OR STICKER TO WORK YOU, I DID READ THAT NIGHT IN THE
MANUAL DO NOT FILL OVER THE FILLER NECK, THANKS FOR WARNING
ME SOME WHERE ON THE BIKE, ALL OTHER BIKE I HAVE OWNED
WHICH HAVE BEEN MANY YOU FILL THEM UP TO THE TOP NO
PROBLEM, WHAT A BAD DESIGN

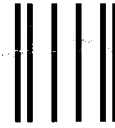
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

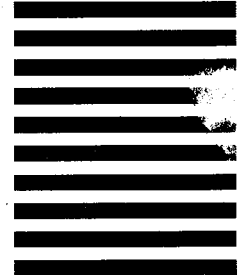
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300



**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



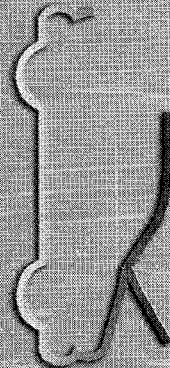
BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Ave SE
Washington, DC 20077-9382**



**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 Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration
www.nhtsa.gov