



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

31-JUL-2008

Repository

Reference No.  
10236553

OWNER INFORMATION (Type or Print)

Name

Address

City

FILOUX FALLS Sioux Falls

State SD

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?  
In the absence of a signature, I provide your name or address to the vehicle manufacturer.

YES  NO  
Date 7/24/08

Signature of Owner

Date

VEHICLE INFORMATION

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

4X4WCH 207

Make

FOREST RIVER

Model

WILDWOODLE  
Wildcat 32QBBS

Model Year

2007

Date Purchased

3/2007

Dealer's Name and Telephone Number

Stans Northview Campers

Engine:

No: Cylinders

Fuel Type:

Original Owner

Dealer's City

Sioux Falls

State

SD

Zip Code

57103

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

350000 EQUIPMENT

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

15-MAY-2008

Failure Mileage

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Goodyear SRT

Tire Model (Name or Number)

Power King

Tire Size (Example P215/65R15)

P225/75/R15

DOT No. (Example: DOTM19ABC036)

Original Equipment  
 Prior Repair

Failure Location:

valve stems

Tire Component Code

DeStar Rims from DeStar Wheel comp.

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 2007 FORREST RIVER WILD CAT 32QBBS. AS THE CONTACT WAS CHECKING THE TIRE PRESSURE ON HIS VEHICLE THE VALVE STEM ON THE FRONT PASSENGER SIDE TIRE HAD BROKEN OFF OF THE RIM. THE TIRES WERE TAKEN TO A LOCAL TIRE DEALERSHIP WHERE THE VALVE STEMS WERE REPLACED. AS OF JULY 31, 2008, THE DEALER HAD NOT INSPECTED THE VEHICLE. THE FAILURE MILEAGE WAS 900 AND THE VIN WAS UNAVAILABLE.

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.