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: AUG 2 5 2010 (13-AUG-2008)

Repository ☐

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## OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City: JACKSONVILLE | State: FL | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

*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 5/7/10

## VEHICLE INFORMATION

| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side | Make | Model | Model Year |
|---|---|---|---|
| 4NUDS13S742[redacted] | ISUZU | ASCENDER | 2004 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: | Fuel Type: |
|---|---|---|---|---|---|
| | | | | No: Cylinders | |
| Original Owner ☒ | Dealer's City | State | Zip Code | | |

| Transmission Type | | | Vehicle Component Code |
|---|---|---|---|
| | ☐ Antilock Brakes<br>☒ Cruise Control | Powertrain | 110000 ELECTRICAL SYSTEM<br>Multiple Failure: |

## FAILED COMPONENT(S)/PART(S) INFORMATION

| Incident Date(s) | Failure Mileage | Failure Speed |
|---|---|---|
| 10-AUG-2008 | 80000 | 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 2004 ISUZU ASCENDER. THE CONTACT STARTED THE IGNITION AND NOTICED THAT THE DIGITAL ODOMETER AND GEAR GAUGES WERE INOPERATIVE. ALSO, ALL OF THE WARNING LIGHT INDICATORS WERE NOT WORKING ON THE INSTRUMENT PANEL. THERE WERE NO WARNINGS PRIOR TO THE INTERMITTENT FAILURES. THE VEHICLE WAS BEING SCHEDULED FOR AN APPOINTMENT AT THE AUTHORIZED DEALER. THE VIN WAS UNKNOWN. THE FAILURE AND CURRENT MILEAGES WERE 80,000.

NEW ELECTRICAL PROBLEM (2010, APRIL) = WITH A NEW BATTERY, CLOCK LOST HRS.

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