

December 29, 2009

2010 MAR 16 AM 2:36

DOT / NHTSA

CL-
10318692Attn: George Gillespie
NVS 222, Rm. W43-4661200 New Jersey SE
Washington, DC 20590

Dear Mr. Gillespie:

I spoke with you recently by phone on December 23 regarding the Uniroyal tires on my car.

Both dealers who sold these tires have told me the tires are mounted correctly, yet the tread pattern appears to be asymmetrical. They have stated the tires are safe; that there are no problems with them; however, the middle tread bar has no sipes, even on the newer tires.

Enclosed are copies of the invoices and pictures of the tire treads marked left and right as they are mounted on the car.

Please respond on this matter to:

EDWARDSVILLE, IL

PHONE

or

N. McLaughlin
NH
031610
RW



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

2010 MAR -2 AM 7:54

FOR AGENCY USE ONLY

Date Received

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

10318692

OWNER INFORMATION (Type or Print)

Name _____
Street No. _____ Apt. No. _____
City EDWARDSVILLE State IL Zip _____

Daytime 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 1/1/10

PRODUCT INFORMATION

Vehicle Identification No. (VIN) (Located at bottom of windshield on driver's side) _____
Make MITSUBISHI Model DIAMANTE Year 1999
6MMA P47P7XT _____
Purchased Date _____ Dealer's Name _____ Engine Size (CID/CC/L) _____ ☐ Turbo
☐ New ☐ Used Dealer's City _____ State _____ Zip Code _____ ☐ Diesel
☐ Automatic ☐ Manual ☐ Passengerside Air Bag ☐ 2-Point Belt ☐ No ☐ Cruise Control ☐ Front ☐ Rear ☐ 4-Wheel ☐ Other _____
Manufacture Date (on driver's door or pillar) _____ Transmission Type _____ Restraint System _____ Vehicle Type _____ Body Style _____
☐ 2-Door ☐ 4-Door
☐ Stationwagon
☐ Pick Up Truck
☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) _____ Location ☐ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☐ Original ☐ Replacement
Handicap Adaptive Equip ☐ Yes ☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand UNIROYAL Tire Name UNI TP TOURING BLK Complete Tire Size 215/60R 16 95V
No. of Failures 1 Date(s) of Failure(s) 9/4/09 Mileage at Failure(s) 102,590 Vehicle Speed at Failure(s) 60-65
Failed Part(s) Available? ☐ Yes ☒ No
NHTSA Previously Contacted? ☒ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash ☐ Yes ☒ No Fire ☐ Yes ☒ No Number of Persons Injured _____ Number of Fatalities _____ Reported to Manufacturer ☐ Yes ☐ No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

SEE ATTACHED LETTER:

1) TREAD PATTERN APPEARS ASYMMETRICAL, YET TIRES ARE MOUNTED WITH TREAD PATTERN IN SAME DIRECTION ON BOTH SIDES OF THE AUTO

2) THERE ARE NO SIGNIFICANT SIDES ON THE MIDDLE TREAD BARS, EVEN ON THE NEWER TIRES

3) THE TIRES HAVE NO TREADWEAR, TEMPERATURE OR OTHER RATINGS ON THEM.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

CC: GEORGE GILLESPIE, NHTSA
NV5-222

Mail postage free or fax to 202-366-7882

[REDACTED]
Edwardsville, IL
[REDACTED]

SAINT LOUIS MO 631

23 FEB 10 PM 02 L



U.S. Dept of Transportation
National Highway Safety Traffic Admin.
Office of Defects Investigation
NSA-10.01

400 7th St. SW

Washington, DC 20590

