



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 11-MAY-2010	Repository <input type="checkbox"/>
	Reference No. 10329889

**OWNER INFORMATION (Type or Print)**

Name	Daytime Telephone Number	E-mail Address
Address	Evening Telephone Number	
City DRACUT	State MA	Zip Code

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 4S2DM58W3Y4	Make ISUZU	Model RODEO	Model Year 2000
Date Purchased 12-27-06	Dealer's Name and Telephone Number	Engine: No: Cylinders 6	Fuel Type:
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
	<input type="checkbox"/> Cruise Control		Incident Date(s) 01-MAY-2009

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

Vehicle Component Codes: 161000 STRUCTURE: FRAME AND MEMBERS, 160000 STRUCTURE	Failure Mileage 100000	Failure Speed 0
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**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: DOTM4L9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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**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 2000 ISUZU RODEO. THE CONTACT STATED THAT IN MAY 2009, SHE BEGAN TO NOTICE PITTED CORROSION AND RUST ON THE FRAME OF THE VEHICLE. HER LOCAL MECHANIC INFORMED HER THAT THE VEHICLE WAS UNSAFE TO DRIVE IN THAT CONDITION. THE VEHICLE HAD NOT BEEN REPAIRED AT THE TIME OF THE COMPLAINT; SHE ONLY DROVE SHORT DISTANCES. SHE HAD NOT CALLED THE MANUFACTURER WHEN THE COMPLAINT WAS FILED. THE FAILURE MILEAGE WAS APPROXIMATELY 100,000. THE CURRENT MILEAGE WAS APPROXIMATELY 133,000. UPDATED 11/03/10. \*1J

vehicle has been off road since complaint. vehicle actually sits uneven to the eye in back, frame totally broken. vehicle broke on highway, traveling app. 55-60 MPH while making lane change. vehicle then swayed back & forth while in motion.

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.





THE COMMONWEALTH OF MASSACHUSETTS  
OFFICE OF THE ATTORNEY GENERAL

ONE ASHBURTON PLACE  
BOSTON, MASSACHUSETTS 02108

(617) 727-2200  
www.mass.gov/ago

MARTHA COAKLEY  
ATTORNEY GENERAL

June 17, 2010

[Redacted]  
Dracut, MA [Redacted]

Dear [Redacted]

Thank you for contacting Attorney General Martha Coakley's Public Inquiry & Assistance Center. The Attorney General's Office offers a free, voluntary mediation program aimed at resolving disputes between consumers and businesses outside of court. Although we cannot require a merchant to participate in this voluntary service, many businesses do choose to take part in the process. As a result, our office is able to help many individuals resolve consumer problems.

I have forwarded your complaint to the Local Consumer Program (LCP) in your area. This program works in partnership with the Attorney General's Office to provide information and informal mediation services to consumers. A mediator from the Program will review your information and will be in touch with you. The Local Consumer Program is:

Middlesex Community College Law Center  
33 Kearney Square  
Lowell, MA 01852  
(978) 656-3342

CASE # 100668

The LCP will contact you in the order in which your complaint was received. The mediator assigned to your case may at that time ask you for more information or further documentation to assist in the mediation process. However, if you have questions or concerns about any part of this procedure, you may also call the above program directly. To learn more about this program and other services and information offered, you may refer to the Attorney General's web page at [www.mass.gov/ago](http://www.mass.gov/ago).

Sincerely,

Megan Murphy  
Public Inquiry & Assistance Center

