


INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

 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 JUL 29 2010 17-JUN-2010		Repository <input type="checkbox"/> Reference No. 10336756	
OWNER INFORMATION (Type or Print)							
Name				Daytime Telephone Number		E-mail Address	
Address				Evening Telephone Number			
City SYLVA		State NC		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 5B4MP67G313				Make FLEETWOOD		Model SOUTHWIND	Model Year 2002
Date Purchased 12-08		Dealer's Name and Telephone Number Private			Engine: No: Cylinders 8		Fuel Type: Gas
Original Owner <input type="checkbox"/>		Dealer's City		State	Zip Code		
Transmission Type Allison	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain 8.1 Chev.		Multiple Failure: yes		Incident Date(s) 02-JUN-2010	
<input checked="" type="checkbox"/> Cruise Control							
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Codes: 141000 AIR BAGS: FRONTAL, 030000 SERVICE BRAKES, HYDRAULIC						Failure Mileage 40200	Failure Speed 15
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)		<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 2002 FLEETWOOD SOUTH WIND RV WITH W22 CHASSIS. WHILE DRIVING AT 15 MPH, THE CONTACT NOTICED AN UNUSUAL BURNING ODOR AND THE BRAKES WERE NOT OPERATING AS NORMAL. THE CONTACT DISCOVERED THE BRAKE FLUID WAS EXTREMELY LOW AND WAS CAUSING THE BRAKE FAILURE. THE MANUFACTURER VERIFIED THE VEHICLE WAS INVOLVED IN NHTSA CAMPAIGN ID NUMBER: 09V110000 (SERVICE BRAKES, HYDRAULIC) AND THAT THE VEHICLE WOULD NEED TO BE INSPECTED BEFORE RECALL REPAIRS WERE PERFORMED. THE CONTACT WAS NOT COMFORTABLE WITH DRIVING THE VEHICLE TO THE DEALER FOR FEAR OF A POSSIBLE FAILURE OR CRASH. THE VEHICLE WAS NOT REPAIRED. THE FAILURE AND CURRENT MILEAGES WERE 40, 200.							
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 to 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), Cause(s), and Injury(ies)

Brake Failure due to faulty pistons in the Bosch Calipers
ABS light on & does not go off indicating burnt sensor. Nearest dealer
is 120 miles & pistons are possibly still in the frozen (brake drag) position
workhorse advises they still do not have replacement parts to execute the
repair. This is a serious problem and needs immediate attention. Please
help. If possible please force workhorse to correct this problem.

Thank

7-20-10

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

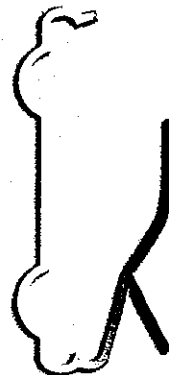
WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 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