Form Approved: O.M.B. No. 2127-0008

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 100237

Date Received: OCT 1 2 2010 / 26-JUL-2010

Repository ☐

Reference No. 10345522

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City: UNION CITY | State: PA | Zip Code: [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number

E-mail Address

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	Make	Model	Model Year
4V4NC9THX6N[redacted]	VOLVO	VNL	2006

Date Purchased	Dealer's Name and Telephone Number	Engine: No. Cylinders	Fuel Type:
5/2006	Volvo+Gmc truck Center of Carolina	6	Diesel

Original Owner	Dealer's City	State	Zip Code
☐	Charlotte	NC	28256

Transmission Type			Multiple Failure:	Incident Date(s)
	☐ Antilock Brakes ☒ Cruise Control	Powertrain: Cummins	1	23-JUN-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 980000 UNKNOWN OR OTHER, 190000 TIRES, 203000 WHEELS: LUGS/NUTS/BOLTS	Failure Mileage	Failure Speed
		65

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

N/A

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			Y

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).

2006 VOLVO VNL64T, UNIT 2 TIRE AND RIM CAME OFF AT MILE POST 57.8. UNIT 2 DIDN'T REALIZE HE LOST HIS TIRE AND RIM UNTIL HE WAS AT MILE POST 53.
SUPPLEMENTED OH-2 WITH TURNPIKE DAMAGE. SEVERAL VEHICLES WERE DAMAGE. *BF
OHIO TRAFFIC CRASH POLICE REPORT NUMBERS;10-0237-89, 10-0238-89, AND 10-0240-898. *JB UPDATED 08/05/10 *BF

NOTE- WHEELS DID NOT COME OFF THE POWER UNIT. THE TIRES AND RIMS CAME OFF THE TRAILER

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