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	Repository ☐
MAR 2 2 2011 17-FEB-2011	Reference No. 10383154

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address	[redacted]	Evening Telephone Number	
City FOUNTAIN VALLEY	State CA	Zip Code [redacted]	

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
1F6NF53YX60[redacted]	FLEETWOOD	BOUNDER	2006

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
1-11-2006	GAINTRV 951-696-7444			8	GAS
Original Owner ☒	Dealer's City MURRIET AVE.	State CA.	Zip Code 92562		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
AUTO.	☒ Antilock Brakes ☒ Cruise Control	FORD		17-DEC-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 130000 VISIBILITY	Failure Mileage	Failure Speed
	18000	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			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 2006 FLEETWOOD BOUNDER RV. THE CONTACT STATED THAT THE PASSENGER WINDOW BECAME FOGGY DUE TO THE SEAL LEAKING. THE FAILURE CAUSED HIS VISION TO BE OBSCURED WHEN HE HAD TO LOOK OVER TO MERGE INTO ANOTHER LANE. THE VEHICLE HAS NOT BEEN INSPECTED OR REPAIRED. THE MANUFACTURER WAS CONTACTED AND ADVISED HIM TO REPLACE THE WINDOW AT HIS EXPENSE. THE FAILURE MILEAGE WAS APPROXIMATELY 18,000 AND THE CURRENT MILEAGE WAS APPROXIMATELY 19,000.

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