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|  <p>U.S. Department of Transportation<br/>National Highway Traffic Safety Administration</p>                                                                                                                                                                                                                                                                                                                                                                                                           |  | <p>DOT Auto Safety Hotline</p> <p><b>Vehicle Owner's Questionnaire</b><br/>To Report Vehicle Safety Defects<br/>1-888-DASH-2-DOT<br/>(1-888-327-4236)<br/>INTERNET: www.nhtsa.dot.gov/hotline</p> |  | <p>FOR AGENCY USE ONLY 100148</p>                                                      |  |
| <p><b>OWNER INFORMATION (Type or Print)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | <p>Date Received<br/><b>SEP 16 2011</b><br/>17-AUG-2011</p>                                                                                                                                       |  | <p>Repository <input type="checkbox"/></p>                                             |  |
| <p>Name <span style="background-color: black; color: black;">[REDACTED]</span></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <p>Daytime Telephone Number <span style="background-color: black; color: black;">[REDACTED]</span></p>                                                                                            |  | <p>Reference No.<br/>10419900</p>                                                      |  |
| <p>Address <span style="background-color: black; color: black;">[REDACTED]</span></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <p>Evening Telephone Number</p>                                                                                                                                                                   |  | <p>E-mail Address</p>                                                                  |  |
| <p>City MIAMI SPRINGS</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | <p>State FL</p>                                                                                                                                                                                   |  | <p>Zip Code <span style="background-color: black; color: black;">[REDACTED]</span></p> |  |
| <p>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).</p>                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p><b>VEHICLE INFORMATION</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>17 digit Vehicle Identification Number Located at bottom of windshield on driver's side<br/><b>WB104992 A36Z <span style="background-color: black; color: black;">[REDACTED]</span></b></p>                                                                                                                                                                                                                                                                                                                                                                                          |  | <p>Make<br/>BMW</p>                                                                                                                                                                               |  | <p>Model<br/>R1150 R GS<br/>Adventure</p>                                              |  |
| <p>Model Year<br/>2006</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  | <p>Engine:<br/>No: Cylinders 2</p>                                                                                                                                                                |  | <p>Fuel Type:</p>                                                                      |  |
| <p>Date Purchased<br/>4/3/2006</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | <p>Dealer's Name and Telephone Number<br/>441 Cycle Shop 9545818970</p>                                                                                                                           |  | <p>Original Owner <input type="checkbox"/></p>                                         |  |
| <p>Dealer's City<br/>Plantation Florida</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | <p>State FL</p>                                                                                                                                                                                   |  | <p>Zip Code</p>                                                                        |  |
| <p>Transmission Type</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | <p><input checked="" type="checkbox"/> Antilock Brakes<br/><input type="checkbox"/> Cruise Control</p>                                                                                            |  | <p>Powertrain</p>                                                                      |  |
| <p>Multiple Failure:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | <p>Incident Date(s)<br/>01-JUL-2011</p>                                                                                                                                                           |  | <p></p>                                                                                |  |
| <p><b>FAILED COMPONENT(S)/PART(S) INFORMATION</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>Vehicle Component Code: 030000 SERVICE BRAKES, HYDRAULIC</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                   |  | <p>Failure Mileage<br/>8700</p>                                                        |  |
| <p>Failure Speed</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>Tire Make</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  | <p>Tire Model (Name or Number)</p>                                                                                                                                                                |  | <p>Tire Size (Example P215/65R15)</p>                                                  |  |
| <p>DOT No. (Example: DOTM9ABC036)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  | <p><input type="checkbox"/> Original Equipment<br/><input type="checkbox"/> Prior Repair</p>                                                                                                      |  | <p>Failure Location:</p>                                                               |  |
| <p>Tire Component Code</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                   |  | <p>Tire Failure Type:</p>                                                              |  |
| <p><b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>Make:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <p>Date Manufactured:</p>                                                                                                                                                                         |  | <p>Model No./Name:</p>                                                                 |  |
| <p>Seat Type:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <p>Installation System:</p>                                                                                                                                                                       |  |                                                                                        |  |
| <p>Child Seat Component Code:</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | <p>Failed Part:</p>                                                                                                                                                                               |  |                                                                                        |  |
| <p><b>APPLICABLE INCIDENT INFORMATION</b><br/>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>Crash<br/><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | <p>Fire<br/><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>                                                                                                               |  | <p>Number of Persons Injured</p>                                                       |  |
| <p>Number of Deaths</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <p>Reported to Police<br/>N</p>                                                                                                                                                                   |  |                                                                                        |  |
| <p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b><br/>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).</p>                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>TL* THE CONTACT OWNS A 2006 BMW R1150(N/A). THE CONTACT TOOK THE MOTORCYCLE IN FOR SERVICE, THE DEALER INFORMED HIM THAT THE ABS UNIT WAS INOPERABLE AND NEEDED TO BE REPLACED. THE MANUFACTURER HAD NOT BEEN NOTIFIED AND THE VEHICLE HAD NOT BEEN REPAIRED. THE CURRENT AND FAILURE MILEAGES WERE 8,700. THE VIN WAS UNAVAILABLE.</p>                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                   |  |                                                                                        |  |
| <p>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.</p> |  |                                                                                                                                                                                                   |  |                                                                                        |  |