

<p style="text-align: center;">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</p>	FOR AGENCY USE ONLY 100148	
	Date Received DEC - 7 2012 26-OCT-2012	Repository <input type="checkbox"/>
Reference No. 10482347		

OWNER INFORMATION (Type or Print)			
Name	[REDACTED]		
Address	[REDACTED]		
City	State	Zip Code	E-mail Address
PUNTA GORDA	FL	[REDACTED]	[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 5VPSW36D4A3 [REDACTED]	Make VICTORY	Model VISION	Model Year 2010
Date Purchased 10-10-2010	Dealer's Name and Telephone Number VICTORY LAURE		Engine: No: Cylinders 17 C.C.
Original Owner <input checked="" type="checkbox"/>	Dealer's City ESTERO	State FL	Zip Code [REDACTED]
Transmission Type <input checked="" type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain SHAFT.	Multiple Failure: TURNING FAILURE.	Incident Date(s) 07-AUG-2012

FAILED COMPONENT(S)/PART(S) INFORMATION		
Vehicle Component Codes: 162000 STRUCTURE: BODY, 020000 SUSPENSION	Failure Mileage	Failure Speed

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			
<i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury (ies).)</i>			
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" 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 2010 VICTORY VISION MOTORCYCLE. THE CONTACT STATED THAT THE FRONT OF THE REAR FENDER BECAME CRACKED, CAUSING THE REAR WHEEL TO SEIZE ABNORMALLY. THE CONTACT WAS ABLE TO STOP THE VEHICLE WITHOUT INCIDENT. THE CONTACT SPOKE WITH THE DEALER AND WAS ADVISED THAT THE FENDER WOULD NEED TO BE REPLACED, BUT THE PART WAS ON BACK ORDER AND REPAIRS COULD NOT BE MADE UNTIL FURTHER NOTICE. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS UNKNOWN, BUT THE CURRENT MILEAGE WAS 22,622.

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

REAR PORTION OF FRONT FENDER, COMPROMISED (CRACKED)
LEAVING A PORTION TO BE LODGED ONTO THE BODY (MAIN FRAME)
OF MOTORCYCLE RENDERING THE BIKE INOPERABLE TO STEER.
THIS MAY LEAD OTHERS INTO AN ACCIDENT WHEN TRYING
TO MANEUVER IT IN A SAFE MANNER. Hoping this will
keep Riders safe! Thank you
TO THIS DATE THE PART IS ON BACK ORDER!

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

