

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148	
Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline				Date Received JAN 29 2013	Repository <input type="checkbox"/>
				11-DEC-2012	Reference No 10487943
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	E-mail Address
City		State	Zip Code	Evening Telephone Number	
COOPER CITY		FL			
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	
5SFCG3026BE		HEARTLAND	ROAD WARRIOR	2011	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
6/10/2011	Florida's outdoor RV 772-388 9985		No: Cylinders		
Original Owner	Dealer's City	State	Zip Code		
<input checked="" type="checkbox"/>	STUART	FL	34994	N/A	
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:		Incident Date(s)
N/A	<input type="checkbox"/> Cruise Control	N/A			21-NOV-2012
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 190000 TIRES, 191000 TIRES: TREAD/BELT				Failure Mileage	Failure Speed
				800	60
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
POWER KING	TOWMAX		LT235/80R16 E		
DOT No. (Example: DOTM19ABC036)	<input checked="" type="checkbox"/> Original Equipment		Failure Location: DRIVER SIDE REAR		
DOT 8385 GPR 3510	<input type="checkbox"/> Prior Repair				
Tire Component Code	Tire Failure Type:				
191000 TIRES:TREAD/BELT	TREAD SEPARATION				
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	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A	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 2011 HEARTLAND ROAD WARRIOR RV EQUIPPED WITH POWER KING TOWMAX TIRES, SIZE: 235/80R16. THE CONTACT STATED THAT WHILE DRIVING 60 MPH AND TOWING THE RV, THERE WAS A THUD HEARD FROM THE REAR OF THE VEHICLE. THE CONTACT STOPPED AND DISCOVERED THAT THE REAR DRIVER'S SIDE TIRE TREAD SEPARATED FROM THE TIRE AND THE STEEL CHORDS HAD BECOME VISIBLE. THE CONTACT INSPECTED ALL OF THE TIRES AND FOUND THAT THE REMAINING TIRES EXHIBITED TREAD SEPARATION AND BULGES. THE FAILED TIRE WAS REMOVED AND THE SPARE TIRE WAS INSTALLED. THERE WERE EXTENSIVE DAMAGES TO THE DRIVER'S SIDE SKIRT OF THE VEHICLE, WHICH WAS MADE OF ALUMINUM. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE AND INFORMED THE CONTACT TO SEND IN THE FAILED TIRES FOR FURTHER ASSESSMENT. THE FAILURE MILEAGE FOR BOTH THE TIRE AND THE VEHICLE WAS 800. THE DOT NUMBER WAS NOT AVAILABLE.					
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), Crash(es), and Injury(ies)

I Replaced All 5 TIRES with Good Year 6114. Also Replaced the RIMS with THE Adequate Load Rating.



ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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











CAUTION
GASOLINE ONLY
BEARE DUNE ALL FUEL
LIGHTS ARE OFF BEFORE
FILLING GAS TANK

UNLEADED FUEL ONLY







FLORIDA OUTDOORS RV
 1160 SE. FEDERAL HIGHWAY
 STUART FL USA 34994-
 Phone #: (772) 288-2221
 Fax #: (772) 228-8404

Invoice Number: 127560A
 Tag Number:
 Date and Time In: 12/7/2012 - 2:43 PM
 Date and Time Out: 12/6/2012 - 11:34 AM
 Promised Date - Time: 12/6/2012 - 11:34 AM
 Cashed Out Date:
 Date Appointment Initiated: 12/6/2012
 Service Advisor: (51) PHIL PYLE



SUNRISE FL
 Home
 Cell

200211 Veh Info: 3568 11 Heartland Road Warrior 305RW TH FW Caramel
 Serial Numbers: 5SFCG3026BE
 In-Srv: 6/22/2011 Miles/Hrs In: Out: Plate #:

Repair	Hrs	VIN	Requested Repair Description	Mech #	Type	Labor	Discount	Total
1	0.00	BE	REPAIR PER ESTIMATE CAUSE: GEICO CLAIM# DEDUCTIBLE \$500.00 BLACK HOSE/TUBE HANGING DOWN IN BACK OF COACH FUEL PUMP IN COMPARTMENT DOOR NOT WORKING.		Retail	\$0.00	\$0.00	\$0.00
2	5.00	BE	CUSTOMER HAD A DRIVERS SIDE BLOWOUT REPLACE J-WRAP		Retail	\$495.00	\$0.00	\$495.00
3	6.50	BE	REPAINT REAR J-WRAP		Retail	\$643.50	\$0.00	\$643.50
4	1.00	BE	FRONT J-WRAP DMAGED CAUSE: REPLACE J-WRAP		Retail	\$99.00	\$0.00	\$99.00
5	1.50	BE	REPAINT FRONT J-WRAP		Retail	\$148.50	\$0.00	\$148.50
6	0.50	BE	REPLACE DECALS ON J-WRAP CAUSE: NO SMOKING DECAL AND FUEL DECAL		Retail	\$49.50	\$0.00	\$49.50
7	1.00	BE	REMOVE AND REINSTALL BELTLINE MOULDING AND REASEAL CAUSE: R&I MOULDING		Retail	\$99.00	\$0.00	\$99.00
8	0.30	BE	REMOVE AND REINSTALL MARKER LIGHT		Retail	\$29.70	\$0.00	\$29.70
9	1.00	BE	REMOVE AND REINSTALL DUAL FUEL FILLER TUBES. CAUSE: REPLACE 1 FUEL FILLER CAP		Retail	\$99.00	\$0.00	\$99.00
10	1.00	BE	REMOVE AND REINSTALL COMPARTMENT DOOR		Retail	\$99.00	\$0.00	\$99.00
11	0.50	BE	REPLACE FENDER SKIRT		Retail	\$49.50	\$0.00	\$49.50
12	0.50	BE	REMOVE AND REINSTALL REAR VERTICAL CAP MOULDING		Retail	\$49.50	\$0.00	\$49.50
13	0.50	BE	REPAIR FUEL PUMP CAGE		Retail	\$49.50	\$0.00	\$49.50
14	0.30	BE	UNDERCOAT FUEL CAGE		Retail	\$29.70	\$0.00	\$29.70

PLEASE READ CAREFULLY. CHECK ONE OF THE
 STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT
 UNDER STATE LAW, I AM ENTITLED TO A WRITTEN
 ESTIMATE. IF MY FINAL BILL WILL EXCEED \$500.00, I
 REQUEST A WRITTEN ESTIMATE. I DO NOT REQUEST A
 WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DOES
 NOT EXCEED \$. THE SHOP MAY NOT
 EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL
 APPROVAL. I DO NOT REQUEST A WRITTEN ESTIMATE.

Parts Total:	\$467.56
Core Total:	\$0.00
Freight Total:	\$85.00
Sublet Total:	\$0.00
Labor Total:	\$1,989.90
- Labor Discount:	\$0.00
Other Charges:	\$256.00
Shop Supplies:	\$0.00
Sub Total:	\$2,798.46
- Parts Discount:	\$0.00

Ext Price:	\$2,798.46
Sales Tax:	\$167.91
Total:	\$2,966.37
- Deductible:	\$0.00
- Deposits:	\$0.00
Amount Due:	\$2,966.37
Amt Tendered:	\$0.00
Chg Returned:	\$0.00

FLORIDA OUTDOORS RV
 1160 SE. FEDERAL HIGHWAY
 STUART FL USA 34994-
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 Fax #: (772) 228-8404

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 Service Advisor: (51) PHIL PYLE



[REDACTED]
 SUNRISE FL [REDACTED]
 Home [REDACTED]
 Cell [REDACTED]

200211 Veh Info: 3568 11 Heartland Road Warrior 305RW TH FW Caramel
 Serial Numbers: 5SF3CG3026BE [REDACTED]
 In-Srv: 6/22/2011 Miles/Hrs In: Out: Plate #:

15	0.50	BE [REDACTED]	REPAIR INNER FRAME BRACKET	Retail	\$49.50	\$0.00	\$49.50
16	0.00	BE [REDACTED]	PAINT AND MATERIALS	Retail	\$0.00	\$0.00	\$0.00

Repair	Part #	Description	Qty	Retail Price	Savings	Selling Price	Extended Discount	Extended Price
2	20X33474A	12' J-WRAP	1.00	\$289.00	\$0.00	\$289.00	\$0.00	\$289.00
6	00n9	decals	1.00	\$18.00	\$7.00	\$11.00	\$0.00	\$11.00
6	00n9	decals	1.00	\$18.00	\$5.00	\$13.00	\$0.00	\$13.00
7	183575	CLEAR CAULK	1.00	\$9.99	\$0.00	\$9.99	\$0.00	\$9.99
8	26765y	MARKER LIGHTS	1.00	\$11.57	\$0.00	\$11.57	\$0.00	\$11.57
10	420120	CAULK WHITE C-10	1.00	\$7.00	\$0.00	\$7.00	\$0.00	\$7.00
11	188069	FENDER SKIRT	1.00	\$126.00	\$0.00	\$126.00	\$0.00	\$126.00
11	FR	FREIGHT	1.00	\$85.00	\$0.00	\$85.00	\$0.00	\$85.00
16	PAINT AND		1.00	\$256.00	\$0.00	\$256.00	\$0.00	\$256.00

PLEASE READ CAREFULLY. CHECK ONE OF THE STATEMENTS BELOW, AND SIGN: I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$50.00, I REQUEST A WRITTEN ESTIMATE. I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DOES NOT EXCEED \$_____. THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL. I DO NOT REQUEST A WRITTEN ESTIMATE.

Parts Total:	\$467.56
Core Total:	\$0.00
Freight Total:	\$85.00
Sublet Total:	\$0.00
Labor Total:	\$1,989.90
- Labor Discount:	\$0.00
Other Charges:	\$256.00
Shop Supplies:	\$0.00
Sub Total:	\$2,798.46
- Parts Discount:	\$0.00

Ext Price:	\$2,798.46
Sales Tax:	\$167.91
Total:	\$2,966.37
- Deductible:	\$0.00
- Deposits:	\$0.00
Amount Due:	\$2,966.37
Amt Tended:	\$0.00
Chg Returned:	\$0.00
As our customer, you just saved:	\$12.00

2603 11th Avenue SE
 Ruskin, FL 33570
 813-645-0736

Florida Registration # [REDACTED]

DATE/TIME: 11/30/12 04:43 pm
 PHONE WHEN READY
 YES NO
 METHOD OF PAYMENT
 CASH CHECK
 CREDIT CARD
 BASIS FOR CHARGES
 FLAT RATE HOURLY RATE BOTH
 REPLACED PARTS REQUESTED
 YES NO
 QUOTES:
 1 11/30 06:30pm 1951.10

QUAN	PART NUMBER/DESCRIPTION	PRICE EA	SALE
5.0	215/75 R175 GOODYEAR STTL	384.15	1,920.75
1.0	NPN STICK ON WHEEL WE	25.35	25.35
RECOMMEND:		TOTAL PARTS: 1,946.10	

NAME: [REDACTED] MILEAGE IN: [REDACTED]
 ADDRESS: [REDACTED] PHONE1: [REDACTED]
 CITY: Ruskin STATE: FL ZIP: [REDACTED] PHONE2: [REDACTED]
 SERIAL NUMBER: [REDACTED] MILEAGE: [REDACTED]
 YEAR MAKE MODEL: [REDACTED] LIC. NO.: [REDACTED]
 OTHER AUTHORIZED PERSON: [REDACTED]

OPER	LABOR INSTRUCTIONS	HRS	LABOR CHARGE
01	DM TIRES DISMOUNT MOUNT AND BALANCE 5 TIRES ON FIFTH WHEEL MOTOR HOME. TIRES SEPERATED AND HAS SEVERAL BULGES IN SIDE WALLS OF TIRES. SHOULD HAVE LOAD RANGE H ON TRAVEL TRAILER.	0.0	0.00

PLEASE READ CAREFULLY. CHECK ONE OF THE STATEMENTS BELOW AND SIGN: I UNDERSTAND THAT UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, IF MY FINAL BILL WILL EXCEED \$100.
 I REQUEST A WRITTEN ESTIMATE.
 I DO NOT REQUEST A WRITTEN ESTIMATE AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$_____.
 THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
 I DO NOT REQUEST A WRITTEN ESTIMATE.

(Signed) _____ Date _____

**This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal. **FS403.718 mandates a \$1.00 fee for each new tire sold in the State of Florida. **FS403.718 mandates a \$1.50 fee for each new or remanufactured battery sold in the State of Florida.

I hereby authorize the above repair work herein set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in the vehicle in case of fire or theft.
 I hereby grant you and/or your employees permission to operate the vehicle on the streets, highways or elsewhere for the purposes of testing and/or inspection. Estimate is good for 30 days

(Signed) _____ Date _____

3 Months or 4000 miles warranty on all parts and labor unless otherwise specified.

A STORAGE FEE OF \$18.00 PER DAY MAY BE APPLIED TO VEHICLES WHICH ARE NOT CLAIMED WITHIN 3 WORKING DAYS OF NOTIFICATION OF COMPLETION

Proposed Completion Date

FLA TIRE TAX	5.00
SURCHARGE TOTAL:	5.00
TOTAL LABOR:	0.00
TOTAL PARTS:	1,946.10
HAZ WASTE:	0.00
SUBLET REPAIRS:	0.00
SHOP SUPPLIES:	0.00
NON TAXABLE:	0.00
TAX:	136.23
TOTAL AMOUNT:	2,087.33
PAYMENT:	0.00
BAL DUE:	2,087.33

WALKERS CMPLT AUTO
2603 11TH AVE, SE
RUSKIN, FL 33570

TERMINAL I.D.: 033500
MERCHANT # :

11/30/12 5:36 PM

MASTERCARD

SWIPED

SALE
BATCH: 000419
INU:000003

AUTH: 03089P
RRN: 04190003

TOTAL \$2087.31

WALKERS COMPLETE
AUTO TRUCK & TIRE LLC

CUSTOMER COPY

Cooper City, FL

CPU U.S. POSTAGE
PB 1P 000 \$ 4.25⁰
3658048 MAILED JAN 15 2013
FCMF 33326



7012 1640 0002 3929 0558

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL™



7012 1640 0002 3929 0558

W48-226

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NHTSA-210
1200 NEW JERSEY AVE SE.
WASHINGTON, D.C. 20077-9382