

 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		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) FOR AGENCY USE ONLY 100148	
		Date Received 05-AUG-2015 SEP 1 2015		Repository ☐ Reference No. 10746444	
OWNER INFORMATION (Type or Print)					
Name		[REDACTED]		Daytime Telephone Number	
Address		[REDACTED]		E-mail Address NOEMAIL@UKN.GOV	
City		COOPERBURG		Evening Telephone Number	
State		PA		[REDACTED]	
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 Year
			FOREST RIVER		2012
Date Purchased		Dealer's Name and Telephone Number		Engine:	
11/18/2012		BOAT N RV		No: Cylinders	
Original Owner		Dealer's City		Fuel Type:	
☒		HAMBURG		N/A	
State		PA		N/A	
Zip Code					
Transmission Type		Antilock Brakes		Incident Date(s)	
N/A		☐		27-JUL-2015	
Cruise Control		Powertrain			
☐		N/A			
		Multiple Failure:			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 162000 STRUCTURE: BODY, 020000 SUSPENSION				Failure Mileage	
				N/A	
				Failure Speed	
				N/A	
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)		☐ 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	
☐ Yes ☒ No		☐ Yes ☒ No		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 2012 FOREST RIVER THUNDERBOLT 35X12 (NA). THE CONTACT STATED THAT THE VEHICLE DEVELOPED A THREE INCH CRACK IN THE EYE BEAM, WHICH SUPPORTS AND MOUNTS THE SUSPENSION. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC FOR DIAGNOSTIC TESTING. THE TECHNICIAN DIAGNOSED THAT IT WAS A STRESS FRACTURE, NOT CAUSED BY ANY TYPE OF WELDING OR HEAT. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS UNKNOWN. THE VIN WAS NOT AVAILABLE.					
PLEASE SEE ADDITIONAL INFORMATION ON BACK					
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)

VEHICLE IS A 2012 FIFTH WHEEL RV TRAILER MANUFACTURED BY FOREST RIVER WITH FRAME SUPPLIED BY LIPPERT COMPONENT INDUSTRIES. THERE ARE 2-12" 34" LONG I-BEAMS THAT ENTIRE RV IS BUILT ON. LIVING QUARTERS ON TOP, 3 AXLE SUSPENSION BELOW. LEFT I-BEAM DEVELOPED A HORIZONTAL CRACK AT REAR SUSPENSION MOUNT. IF FRACTURE CONTINUES, SUPPORT OF LIVING AREA AND POSSIBLE SUSPENSION FAILURE MAY OCCUR. BOTH MANUFACTURERS HAVE REFUSED HELP STATING UNIT HAS A 1 YEAR WARRANTY AND IS NO LONGER COVERED. REQUEST FOR INSTRUCTIONS TO COMPLETE REPAIR UNANSWERED. STATE "INTERNAL DOCUMENTS" AND WILL NOT RELEASE TO ME.

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

LEITCH VALLEY

PA 180

08 SEP '15

PM 11



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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