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 ☐
08-JAN-2016 FEB 25 2016 FEB 25 2016	Reference No. 10818912

OWNER INFORMATION (Type or Print)

Name	[redacted]		
Address	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
City KENSETT	State AR	Zip Code [redacted]	Evening Telephone Number

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
4USBT33544L[redacted]	BMW	Z4	2004

Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:
03-31-2004	CENTER BMW 818 907-9995		No: Cylinders	UNLEADED GASOLINE
Original Owner ☑	Dealer's City SHERMAN OAKS	State CA Zip Code 91401	6	

Transmission Type	☑ Antilock Brakes ☑ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 18-DEC-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 010000 STEERING, 110000 ELECTRICAL SYSTEM	Failure Mileage	Failure Speed
	88000	10

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 2004 BMW Z4. WHILE DRIVING 10 MPH, THE EPS LIGHT ILLUMINATED AND THE STEERING WHEEL BECAME DIFFICULT TO TURN. THE VEHICLE WAS NOT TAKEN TO A DEALER OR REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 88,000.

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