

U.S. Department
of TransportationNational 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

04-MAY-2016

Repository ☐Reference No.
10863141

OWNER INFORMATION (Type or Print)

Name

Address

City

UPPER MARLBORO

State MD

Zip Code

Daytime Telephone Number

E-mail Address

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

5XMTL332065

Make

OPEN RANGE

Model

ROAMER

Model Year

2011

Date Purchased

August 2010

Dealer's Name and Telephone Number

Loo's VEHICLE CENTER

410-989-4193

Engine:

No: Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

Gambroils

State

MD

Zip Code

21054

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Multiple Failure:

Incident Date(s)

07-JAN-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 162000 STRUCTURE: BODY

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: DOTM9ABC036)

☐ 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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

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 2011 OPEN RANGE ROAMER BHS303. WHILE THE VEHICLE WAS PARKED, THE CONTACT NOTICED THAT THE PASSENGER SIDE SLIDE OUT, SEALS, FRONT FRAMELESS WINDOW, LIGHTS, AND STORAGE COMPARTMENT WERE LEAKING. AS A RESULT, THERE WAS MOISTURE AND MOLD IN THE VEHICLE. THE VEHICLE WAS TAKEN TO A DEALER WHERE IT WAS DIAGNOSED THAT THE FRONT PANEL, FLOOR, CARPET, LIGHTS, SEALS, AND STORAGE COMPARTMENT NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE AND VIN WERE UNAVAILABLE.

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)

(below)

Please be advised unit was recently sold under market value; however, I still want to file this report. The manufacturer confirms leaks due to manufacturer defect.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

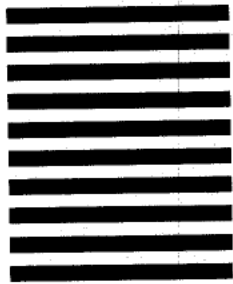
**National Highway
Traffic Safety
Administration**

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

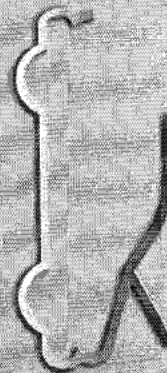
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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

