

OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW: 09282021180347.pdf
Date: Thursday, September 30, 2021 7:58:28 AM
Attachments: [REDACTED]

From: [REDACTED]
Sent: Wednesday, September 29, 2021 10:36 PM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject: 09282021180347.pdf

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Sent from my iPhone

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

19-JUL-2021

Repository ☐Reference No.
11425485

OWNER INFORMATION (Type or Print)

Name

Address

City

VAIL

State

AZ

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
5LZBW3336ERMAKE
ECLIPSEModel
STELLARModel Year
2014

Date Purchased

Dealer's Name and Telephone Number
Jacksonville Chrysler Dodge Je 8776775782Engine:
No: Cylinders

Fuel Type:

Original Owner
☐

Dealer's City Jacksonville

STATE
FLZIP Code
32225

Transmission Type

☐ Antilock Brakes

Powertrain

☐ Cruise Control

Multiple Failure:

Incident Date(s)

01-MAY-2021

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 160000 STRUCTURE

Failure Mileage
18000.0

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)

☐ Original Requirement
☐ 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), 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), 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 parts available).

The contact owns a 2014 Stellar Eclipse Fifth Wheel Trailer. The contact stated that while in for routine maintenance, it was discovered that the subframe had severe rusting and corrosion which had caused multiple holes in the spring rails of the suspension. The vehicle was not yet repaired. The manufacturer and local dealer were not notified of the failure. The approximate failure mileage was 18,000.

Thank you NHTSA/Office of defects. There are some discrepancies and additional information it was reported that there was a problem with the vehicle to the manufacture and the dealer. Also in the report you stay Jacksonville Chrysler Dodge Jeep was the dealer that is not the case it's Cactus RV in Tucson Arizona i've checked with Jacksonville Chrysler Jeep and they have no affiliation with them. Also there's been a Discrepancy of the unit its length and what not I will provide you with pictures and also three level one vehicle inspections one made by Cactus RV there's no way they could've made that inspection a vehicle wasn't there and two that were made today as the vehicle has two identification numbers on it as well as the pictures of the frame I will attach additional sheets thank you

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.



Motor Vehicle Division

48-4504 R06/09 www.azdot.gov

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THIRD PARTY LEVEL I VEHICLE INSPECTION

Purpose: ☒ Title and Registration ☐ Abandoned Vehicle

Inspected For ☒ Title ☐ Dismantle ☐ Salvage ☐ Crush	Date 10/14/2013	Time 1:03 ☒ am ☒ pm
Address/Where Inspection Is Being Performed 1588 N Haskell Ave	City Willcox	State Zip AZ 85643
Vehicle Identification Number 5LZBW33361ER [REDACTED]		

☐ Yes ☒ No VIN appears altered, tampered with, missing or unreadable? (If Yes, refer to Level II/III)

Year 2014	Make STELLAR	Model wideboy	Body Style TV	Color white
Odometer Reading (no tenths)	Number of Axles 6	Cylinders 3	Fuel Type ☒ Gas ☐ Diesel ☐ Alternative Fuel (indicate type):	
Plate Number [REDACTED]	Expiration Date (month/year) JUL 2014	State AZ	Number of Plates 1	Surrendered (if No, explain in Remarks) ☐ Yes ☒ No
Vehicle Condition ☐ Wrecked ☐ Burned ☐ Stripped ☒ Intact ☐ Junk ☐ See Remarks				
Federal Vehicle Identification Number [REDACTED]				

☐ Yes ☐ No Federal Vehicle Identification Number appears altered, tampered with, missing, unreadable or different? (If Yes, refer to Level II/III)

☐ Yes ☐ No Federal Vehicle Identification Number is printed in a language other than English? (If Yes, refer to MVD Enforcement)

Motorcycle Engine Number [REDACTED]
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☐ Yes ☐ No Motorcycle Engine Number appears altered, tampered with, missing or unreadable? (If Yes, refer to Level II/III)

☐ Mobile Home ☐ Trailer ☐ Motor Home	Width 8 ft	Length 40 ft
☐ Other (describe):		
[REDACTED]		

☐ Yes ☐ No Motor Home Coach Number appears altered, tampered with, missing or unreadable? (If Yes, refer to Level II/III)

Ownership Documents/Title Number/Other ID 1WOP	
Towing Company Name	Storage Location ☐ Same as inspection location
Applicant Name (first, middle, last, suffix)	Applicant Signature

I certify that I have conducted a visual inspection of the above described vehicle.

Inspector Name Claudia Fontes	Inspector Signature Claudia Fontes	Inspector Number 10048
Authorized Third Party Name Arizona Auto License	Telephone 520-290-2027	Authorization Number 1997

I certify that the above described vehicle meets safety and equipment requirements and that the required equipment is in good working order (horn, rearview mirror, windshield wipers, two brake systems, mufflers, emissions equipment, two headlights, tail/stop lights, license plate light, reflectors, turn signals, other related equipment).

Operator Name	Operator Signature	Date
Street Address	City	State Zip

Remarks 5m wheel only 1 vin needed. veh in good condition 3 axles 0 cylinders - corrected on mwp.
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Motor Vehicle Division

48-4503 R04/21 azdot.gov

LEVEL I
VEHICLE INSPECTION

Date 9/28/21

Step 1 - Vehicle Identification Number

5	L	Z	B	W	3	3	3	6	E	R	
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☐ US Federal VIN Label Matched

Step 2 - Physical Vehicle Information

Year 2014	Make ECLIPSE RECREATIONAL VEHICLES	Model STELLAR	Body Style TV	Odometer —
☐ Gas ☐ Diesel ☐ Alternative Fuel Type: _____				
☒ Trailer ☐ Mobile Home ☐ Motor Home			Length 45'-2"	Width 8'-6"

Additional Information & Ownership Documents

1WOP

Plate [REDACTED]	State AZ
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Step 3 - Certification & Signatures

I certify that I have not tampered or altered the vehicle identification information that is listed above. I certify I have reviewed this document and the information listed above is accurate.

Operator Name [REDACTED]	Signature [REDACTED]	Date 9/28/21
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I certify I have made a physical verification of the vehicle described above.

Inspector Name / Agency ALEJANDRO C. ARROYO / MAVP	Signature & RACF / Badge # / Employee ID # [Signature] #14647
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Motor Vehicle Division

48-4503 R04/21 azdot.gov

LEVEL I
VEHICLE INSPECTION

Date 9/28/21

Step 1 - Vehicle Identification Number

5	L	Z	B	W	3	4	3	8	E	R	
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☐ US Federal VIN Label Matched

Step 2 - Physical Vehicle Information

Year 2014	Make ECLIPSE RECREATIONAL VEHICLES	Model STELLAR	Body Style TV	Odometer _____
☐ Gas ☐ Diesel ☐ Alternative Fuel Type: _____				
☒ Trailer ☐ Mobile Home ☐ Motor Home			Length 45'-2"	Width 8'-6"

Additional Information & Ownership Documents 1WOP	Plate [REDACTED]	State AZ
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Step 3 - Certification & Signatures

I certify that I have not tampered or altered the vehicle identification information that is listed above. I certify I have reviewed this document and the information listed above is accurate.

Operator Name [REDACTED]	Signature [REDACTED]	Date 9/28/21
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I certify I have made a physical verification of the vehicle described above.

Inspector Name / Agency ALEJANDRO C. ARROYO / MVP	Signature & RACF / Badge # / Employee ID# [Signature] # 14647
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EXHIBIT
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EXHIBIT
23



EXHIBIT

tabbles

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EXHIBIT
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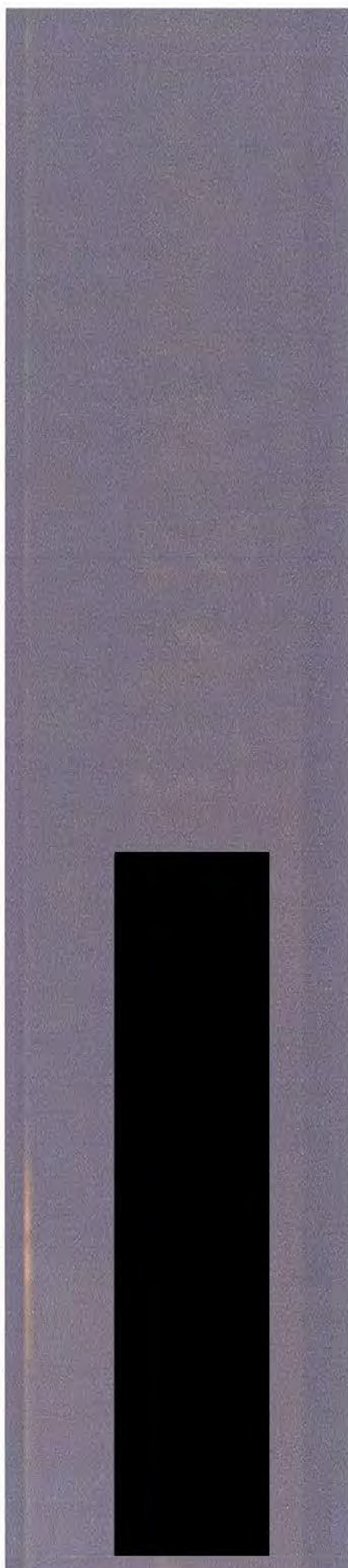


EXHIBIT
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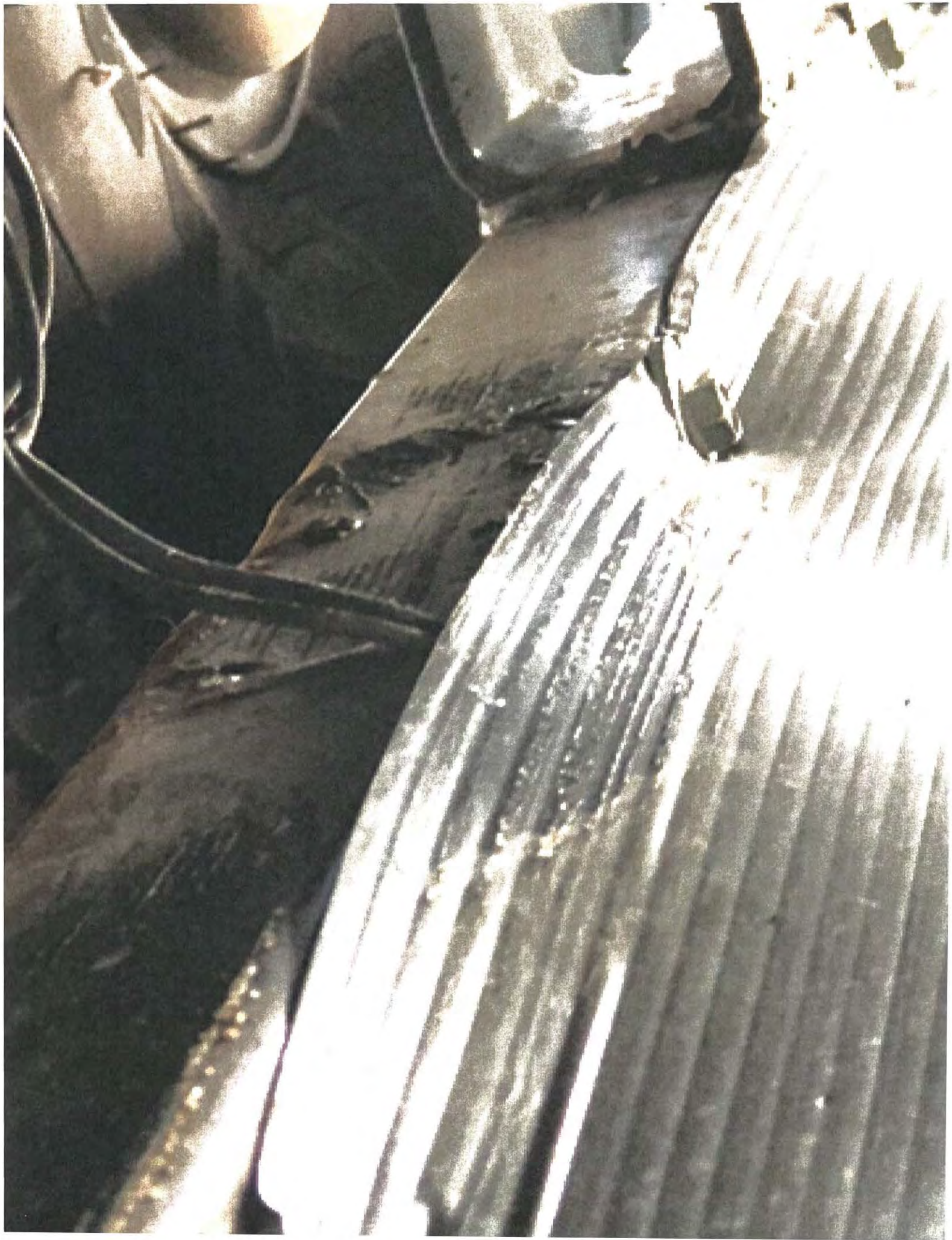


EXHIBIT
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[REDACTED]

Vail Az [REDACTED]

National Highway traffic safety
administration reference number
11425485.

Enclosed is the information that you
requested I can provide more or
access to the vehicle if needed thank
you appreciate you looking into this



