



U.S. Department of Transportation

DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects

Date Received
Form Approved: O.M.B No.2127-0008

Repository

12-MAY-2023
**National Highway
Traffic Safety Administration
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline**

E-mail Address

OWNER INFORMATION (Type or Print)

Daytime Telephone Number
Reference No. 11521697

Name [REDACTED]
Address [REDACTED]
City
Lawrence
[REDACTED]

State	KS	ZIP Code	[REDACTED]
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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 1UJQJSCV7A [REDACTED]
MAKE JAYCO

Model RECON
Model Year 2010

Dealer's Name and Telephone Number			Engine: No: Cylinders
Dealer's City Tulsa	STATE OK	ZIP Code 74015	

Date Purchased Fuel Type:

Original Owner

Transmission Type Powertrain Multiple Failure: Incident Date(s) Antilock Brakes

Cruise Control
11-MAY-2023

FAILED COMPONENT(S)/PART(S) INFORMATION

Failure Mileage 1500.0

Vehicle Components Codes: 110000 ELECTRICAL SYSTEM Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make Tire Model (Name or Number) Tire Size (Example P215/65R15)

Original Requirement Prior Repair

DOT No. (Example: DOTMAL 9ABC036) 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 part is available).

The contact owns a 2010 Jayco Recon. The contact stated that after turning on the air conditioner, there was a smoke odor detected. The contact initially thought the smoke odor was from the air conditioner not being used for a long period. Smoke then filled the bathroom. The contact inspected the transfer switch on the wall under the bedroom/ bathroom and noticed that the transfer switch was charred. The RV has now been repaired and diagnosed by a certified electrician. The certified electrician said that the IOTA its 50-r transfer switch burned up/ caught fire at the buss bar where there was a poor connection. The manufacturer was made aware of the failure and confirmed that there was no recall associated with the VIN. The contact related the failure to NHTSA Campaign Number: 12V347000 (Electrical System) however, the VIN was not included in the recall. This failure costed the owner \$250 for a new transfer switch and \$300 for installation. The owner bought a different brand of transfer switch as IOTA is now out of business. The failure mileage was approximately 1,500.

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.