

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

Date Received

RECEIVED

OCT 11 AM 10:30

POSTED

Copied

Reference No.

555572

OWNER INFORMATION (Type or Print)

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of your signature, provide your name or address to the vehicle manufacturer.

Signature: _____ Date: 10/15/2000

PRODUCT INFORMATION

Vehicle Identification No. (VIN) (17 Digits)		(Located at bottom of windshield on driver's side)		Make	Model	Year
Purchased Date		Dealer's Name		Engine Size (CID/CCM)	☐ Turbo	
☐ New ☐ Used		Dealer's City		State	Zip Code	☐ Diesel
Manufacture Date (on driver's door or pillar)		Transmission Type		Cruise Control	Drivetrain	No. Cylinders ☐ Gas ☐ Fuel Injection
☐ Manual ☐ Automatic		Restraint System		☐ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type
		☐ Driverside Air Bag ☐ Motorbelt ☐ Passengerside Air Bag ☐ 2-Point Belt ☐ 3-Point Belt				☐ Car ☐ Sport Utility ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other
						Body Style
						☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement	☐ Yes ☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand: COOPER	Tire Name: STEEL BELTED RADIAL MS COOPER LIFELINER CLASSIC	Complete Tire Size: P215/70R15-THREADDW 420
No. of Failures: 1	Date(s) of Failure(s): AUG 28, 2000	Failed Part(s): TIRE
	Mileage at Failure(s): 30,000 APPROXIMATE	Available? ☒ Yes ☐ No
	Vehicle Speed at Failure(s): APPROXIMATELY 60	NHTSA Previously Contacted? ☐ Yes ☒ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
☐ Yes ☒ No	☐ Yes ☒ No	NONE	NONE	☒ Yes ☐ No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies): AUGUST 28, 2000 ON NJ TURNPIKE BETWEEN EXIT 8 & 9 TRAVELING AT ABOUT 60 MILES TIRE THREAD CAME OFF. HIT CAR CAUSING DAMAGES ON DRIVERS SIDE (AS SHOWN IN PICTURES AND ESTIMATE ENCLOSED) CAUSING CAR TO SWERVE INTO THE MIDDLE AND RIGHT HAND LANES. FORTUNATELY ON COMING TRAFFIC MISSED HITTING US. GROUND TO ROLL TIRE IN FARMINGDALE NY WHERE I PURCHASED IT. THEY SAID AN ADVISOR WOULD LOOK AT IT AND DID NOT MAKE ANY ADJUSTMENT. I FEEL THIS IS THE FAULT OF THE MANUFACTURE. I HAVE SENT A LETTER TO COOPER RUBBER CO. AND EXPLAINED THE SAME THING. I AM TELLING YOU WAITING FOR SOME ANSWERS. TIRE IS TRACTION-A-TEMPERATURE-B-THREADDW 420 RADIAL MS

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7882

Estimate Report

NAME [REDACTED] DATE 4/24/00 WORK PHONE HOME PHONE
ADDRESS CITY STATE ZIP
YEAR 89 MAKE MERCUY MODEL GRAND MARQUIS I.D. NO.
PART CODE PROD. DATE TRW MILEAGE LICENSE NO. DATE OF LOSS
WRITTEN BY INS. CO. FILE NO. CLAIM NO. P.O. NO.
ADJUSTER LIC. NO. PHONE Deductible/Settlement

Line No.	Qty	Part	Rep. place	DETAILS OF REPAIR			S = STRAIGHTEN RC = RECYCLE/RECHROME/RECORE	PARTS	LABOR	PAINT	SUBLET/MISC.	PART NO.
				N = NEW U = USED	R = REPAIR							
1	X							57 38	5			
2	X								2 5	2 5		
3											5	
4									4			
5	X								3 -	2 -		
6											5	
7	X							88 98	5			
8											5	
9										1 -		
10								31 44				
11												
12												
13												
14												
15												
16												
17												
18												
19												
20											5 -	
21												
22												
23												
TOTALS									6 9	7 -	5 -	

I hereby authorize the above work and acknowledge receipt of copy.

Signed X

Del

FRANK P. VOLPE

Fax 516-822-1429

B.V.F.

AUTO BODY, INC.
HICKSVILLE, NY

223/225 W. John St.
516-433-1818

334 W. Old Country Rd.
516-822-9500

THIS AUTHORIZATION PERMITS THIS SHOP TO DISMANTLE ANY PART OR PARTS FOR FURTHER EXAMINATION FOR THE SOLE PURPOSE OF WRITING A MORE ACCURATE ESTIMATE ON ALL INSURANCE ESTIMATES THE OWNER IS LIABLE FOR LABOR IF THE VEHICLE IS NOT REPAIRED BY THIS SHOP, WHICH IS NOT RESPONSIBLE FOR LOSS BY ANY DAMAGE, INCLUDING BUT NOT LIMITED TO THEFT OR FIRE TO VEHICLE. THIS IS NOT A ROAD TEST.

Signature X

PARTS Prices subject to invoice \$ 177.00

LABOR 6⁹ hrs. @ 50 \$ 345 -

Shop Supplies

PAINT 7- hrs. @ 50 \$ 350-

Paint Supplier

Towing/Storage	\$
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Towing/Storage

Subject/Miscellaneous \$ 5 -

Sublet/Miscellaneous

EPA/Waste Disposal Charge	\$ 3 -
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EPA/Waste Disposal Charge

SUB TOTAL

TAX

TOTAL

ALL WORK GUARANTEED

MAJOR
BRANDS
NEW TIRESWHOLESALE
AND
RETAIL**ROLI RETREADS, INC.**

OLIVER PRE-CURE RETREADING

NEW and USED TIRES - TUBESPhones: 694-7670
694-76751010 FULTON STREET
FARMINGDALE, N.Y. 11735Customer's
Order No.Date 6/24 19 94

Sold

Address

L770A

MOSE. SOLD		MOSE. RET'D		RECD. ON	MISC L	PAID OUT
CASH	CHARGE	CASH	CREDIT	ACCT. NOTE		

QUAN.	SIZE	DESCRIPTION	PRICE	AMOUNT
2	P255/70R15	COVER	7150	14300
2	M16 HSB	1100 L/R CLASSIC		N/C
2	VALVES			N/C
2	BEAD SEALS			N/C
PAID VISA				
			Tax	13.17
			Total	168.17

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL.

0910

Salesman

Received by

1% FINANCE CHARGE ON ALL PAST DUE BALANCES
PURCHASER IS RESPONSIBLE FOR ALL COSTS OF COLLECTION

TIRE IS TRACTION A
TEMPERATURE B
THREADWEAR 420
RADIAL MS



