



# 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

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AGENCY USE ONLY

Date Received: NOV 13 1999

Reference No. **559382**

Daytime Telephone Number: [Redacted]

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
 State: [Redacted]  
 City: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
 in the absence of an express request to the contrary, NHTSA will disseminate this information to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 9/12/31/00

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN) (17 Digits) <u>2G1FP22P852169253</u>		Make <u>Chevrolet</u>	Model <u>Camaro</u>	Year <u>1995</u>
Purchased Date	Dealer's Name <u>River City Ford</u>		Engine Size (CID/CCT) <u>5.7L</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City	State <u>W Va</u>	Zip Code	No. Cylinders <u>8</u>
Manufacture Date (on driver's door or pillar)	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
		Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other	

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Part Name(s) <u>Firestone Firehawk FTX</u>	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand <u>Firestone</u>	Tire Name <u>Firehawk FTX</u>	Complete Tire Size <u>345/50R16</u>
No. of Failures <u>1</u>	Date(s) of Failure(s) <u>Nov. 6, 1999</u>	Collec. Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Mileage at Failure(s) <u>3000</u>	Vehicle Speed at Failure(s): <u>50 mph</u>	
		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**APPLICABLE INCIDENT INFORMATION**

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

Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <u>3</u>	Number of Fatalities <u>1</u>	Reported to Manufacturer <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

I was driving out State Route 243 about 50mph. I was approaching a left curve. As I broke into the curve my car slid to the left and I turn the wheel back towards the right to try to gain control of the car. I started to straighten up the road then it spun around sideways in the road and went into a yard and ran into a telephone pole. The tire completely come off the rim so I couldn't steer the car.

Enclosed you will find pictures of the tire and how it came off the rim.

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 administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

