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Reference No.

**559622**

OFFICE  
 DEFECTS INVESTIGATION



U.S. Department of Transportation  
**National Highway Traffic Safety Administration**

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
 TO REPORT VEHICLE SAFETY DEFECT  
 1-888-DASH-2-DOT  
 (1-888-327-4236)  
 INTERNET: www.nhtsa.dot.gov

**OWNER INFORMATION (Type or Print)**

[Redacted Owner Information]

[Redacted Owner Information]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
 In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 2/10/01

**PRODUCT INFORMATION**

Vehicle Ident. No. (VIN) (17 Digits) <u>1HD1GLV141Y</u>		Make <u>Harley-D</u>		Model <u>FXDXT</u>	Year <u>2001</u>
Purchased Date <u>2/18/00</u>	Dealer's Name <u>Kingman Cycle</u>		Engine Size (CID/CC/L) <u>1450</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City <u>Kingman</u>	State <u>AZ</u>	Zip Code <u>86401</u>	No. Cylinders <u>2</u>	
Manufacture Date (on driver's door or plate)	Transmission Type <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	Restraint System <input type="checkbox"/> Air Bag <input type="checkbox"/> Seat Belt <input type="checkbox"/> Child Seat		Drivetrain <input type="checkbox"/> 4-Wheel	

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

Part Name(s) <u>Motor</u>	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s):	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No
		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fre <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number Persons Injured <u>0</u>	Number of Fatalities <u>0</u>	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

Riding down Highway and with no warning drive + motorcycle covered in oil. Hot oil.

#2 Kick stand spring fell off hit ground forced motorcycle off right side of road.

I've bought 3 Harley motorcycles in 2 yrs they all have some problems!!

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