Form Approved O.M.B. No. 2127-0042

U.S. Department of Transportation

National Highway Traffic Safety Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received: 20-OCT-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No.: 734784

[redacted]

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

Signature of Owner _____ Date____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	FIRESTONE	FIRESTONE	1900	

Purchase Date			
01-AUG-1999	Dealer's Name_____	Engine Size (CID/CC/L 6.2L D	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City_____ State_____ Zip Code_____	No Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☒ Front ☐ Rear ☐ 4-Wheel	☐ Car ☒ Van ☐ Minivan ☐ Other_____ ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
02740000	TIRES:TREAD	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures		Failed Part(s) Available?	NHTSA Previously Contacted?
	Date(s) of Failure(s) 04-SEP-2000 Mileage at Failure(s) 74000 Vehicle Speed at Failure(s) 55	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

ON THE ABOVE DATE S/B BOUND NYS NORTHWAY N/B OF EXIT 16 PASSENGER SIDE REAR TIRE TREAD SEPERATED, ALARGE CHUNK OF THE TREAD PEALED BACK FROM THE INTERIOR PART OF THE TIRE. THE TIRE RETATAINED AIR, AIR LOSS OCCURED SLOWLY ENOUGH TO DRIVE VEHILCE AT A MINIMAL SPEAD APPROX. 1/4 MILE ON SHOULDER TO THE EXIT 16 TRUCK STOP. TIRE CONTINUED TO SLOWLY LOSS ALL AIR. TIRE WAS REMOVED, SPARE WAS INSTALLED. TRIP WAS CONTINUED S/B. ON THE NYS THRUWAY, 1 MILE NORTH OF THE MODENA SERVICE AREA THE LEFT REAR TIRE BLEW OUT. THE TIRE COMPLETELY DISENTEGRATED. THE VEHICLE DROVE OFF OF THE ROAD OUT OF CONTROL, ONTO THE SHOULDER. I HAD INSPECTED THESE TIRES NUMEROUS TIMES PRIOR TO THIS DATE, PRIOR TO ANY FIRESTONE TIRE PROBLEM. ALL FOUR TIRES WERE PROPERLY INFLATED WITH THE COREECT AIR PRE-

CONTINUED ON BACK PANEL

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	GMC	G35	1990	

Purchase Date: 01-AUG-1999 ☐ New ☒ Used

Dealer's Name _____

City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) 6.2L D

No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
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No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
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