Form Approved: O.M.B. No. 2127-0038

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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: http://www.nhtsa.dot.gov

FOR AGENCY USE ONLY	258
Date Received: 07-FEB-2001	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ ip_ltr ____ ____
	Reference No. 740566

[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
4V4ND3JH1YN244730	VOLVO TRUCK	VOLVO TRUCK	1999	

Purchase Date		Engine Size	
☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	(CID/CC/L _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
02100000 10310000	SUSPENSION:INDEPENDENT FRONT VISUAL SYSTEMS:WINDSHIELD WIPER	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
8		☐ 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				☐ Yes ☒ No

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

THE TRUCK IS LEANING TO THE LEFT SIDE.>THE TRUCK HAS PREMATURE STEER TIRE WEAR ON THE RIGHT SIDE.>THE TRUCK HAS EXTENSIVE SHAKING IN THE STEERING WHEEL WHAT CAUSED >REPLACEMENT OF TWO WINDSHIELDS.>THE TRUCK LOOSES WHEEL ALIGNMENT.>MY BIGGEST CONCERN IS THAT A VOLVO GMC TRUCK OF CHICAGO DETERMINED THAT>THE TRUCK HAS BEEN INVOLVED IN AN ACCIDENT. (I HAVE INVOICE TO PROVE IT)>

CONTINUE ON BACK IF NEEDED