Form Approved: OMB No. 2127-0042

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: 04-JUL-2001	Od_or ____ ____ rt_dt ____ ____ od_rt ____ ____ op_ltr ____ ____
	Reference No.: 747850

[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.)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
[redacted]	CHEVROLET TRUC	PICKUP	1991	

Purchase Dat		Engine Size	
01-MAY-1991	Dealer's Name_____	(CID/CC/L 350	☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injectio
☒ New ☐ Used	City_____ State_____ Zip Code_____	No Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Sport Ult ☐ 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
02700000	**TIRES**	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
1	24-JUN-2001	104000 65	☐ 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 Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☒ No				☐ Yes ☒ No

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

DURING DRIVE TO WORK AT APPROX. 6:30 AM (TEMP=70 DEGREES) MY LEFT REAR TIRE CATOSTROPHICALLY FAILED. (NOTE: THIS TIRE WAS ORIGINAL FACTORY EQUIPMENT WHICH WAS NOT INSTALLED UNTILL APPROX 1999). AS I WAS DRIVING, I HEARD SEVERAL LOUD THUMPS FROM THE REAR OF MY TRUCK - JUST AS I LOOKED INTO MY REAR VIEW MIRROR, I SAW THE ENTIRE TREAD OF MY TIRE FLY OFF AND ONTO THE SHOLDER OF THE ROAD. MY TRUCK VIOLENTLY SKIDED SIDEWAYS AND ALMOST FLIPPED OVER - FOR A SHORT TIME I WAS DRIVING ON TWO WHEELS (THE TWO RIGHT WHEELS) AND I WAS ABLE TO BRING THE TRUCK BACK DOWN ON ALL FOUR WHEELS AND PULL OFF THE ROAD. I HAVE NUMEROUS PHOTOGRAPHS OF THIS TIRE AND THE RESULTING DAMAGE. THE SUDDEN FAILURE OF THIS TIRE CAUSED SIGNIFICANT DAMAGE TO THE LEFT WHEEL WELL AND QUARTER PANEL (DUE TO L

CONTINUED ON REVERSE

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

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Signature of Owner _____ **Date**____/____/____

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	UNIROYAL	LAREDO	1900	

Purchase Dat			Engine Size	
01-MAY-1991	Dealer's Name_____		(CID/CC/L 350	☐ Turbo
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