



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

05-APR-2002

Ord. or  
rt. dt  
pd. rt  
up. hr

Reference No.

760286

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)<br><small>(Location at bottom of<br/>windshield and driver's side<br/>door)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| 1B7KC2360WJ228093                                                                                            | DODGE TRUCK  | RAM 2500      | 1998         |                          |

|                                                                                            |                                                                                           |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Purchase Date<br><b>01-JUN-1998</b>                                                        | Dealer's Name _____                                                                       | Engine Size<br>(CID/CC/L) _____                                                                                                                                                                                                              | <input checked="" type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection                                                                                                         |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used                      | City _____ State _____ Zip Code _____                                                     | No. Cylinders _____                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                 |
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic | Antilock Brakes<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No | Restraint System<br><input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt<br><input type="checkbox"/> Passengerside Airbag | Cruise Control<br><input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No                                                                                                                                                                        |
|                                                                                            |                                                                                           | Drive Train<br><input type="checkbox"/> Front<br><input checked="" type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel                                                                                                                | Vehicle Type<br><input type="checkbox"/> Car <input type="checkbox"/> Sport Util<br><input type="checkbox"/> Van <input type="checkbox"/> Truck<br><input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____ |
|                                                                                            |                                                                                           |                                                                                                                                                                                                                                              | Body Style<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input checked="" type="checkbox"/> Pick Up Truck<br><input type="checkbox"/> Other _____                                          |

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

|                            |                                      |                                                                                                                                          |                                                                                             |
|----------------------------|--------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br>02750010      | Part Name(s)<br>TIRES:SIDEWALL       | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No. of Failure<br><b>5</b> | Date(s) of Failure(s)<br>21-OCT-1998 | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><input type="checkbox"/> Yes <input type="checkbox"/> No                |
|                            | Mileage at Failure(s)<br>29516       |                                                                                                                                          |                                                                                             |
|                            | Vehicle Speed at Failure(s)          |                                                                                                                                          |                                                                                             |

## APPLICATION INCIDENT INFORMATION

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

|                                                                   |                                                                             |                           |                      |                           |                                                                                           |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-------------------------------------------------------------------------------------------|
| Crash<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|-------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-------------------------------------------------------------------------------------------|

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

THIS IS A "LOAD RANGE E" GOODYEAR TIRE PROBLEM. AT 30081, 30805, 35213, AND 38060 MILES ONE EACH OF THE ORIGINAL EQUIPMENT TIRES FAILED DUE TO SIDEWALL SEPARATION AND WAS REPLACED AT VARYING CHARGES BY DEALERS. NOW, AT ABOUT 50,612 MILES, ONE OF THE REPLACEMENT TIRES HAS FAILED FOR THE SAME REASON. GOODYEAR IS GIVING ME A "RUN AROUND" AS HAS BEEN THE CASE IN ALL PREVIOUS OCCURRENCES VARIOUSLY CLAIMING THAT THE TIRE IS "NO LONGER AVAILABLE" "ON BACKORDER" "NO LONGER MANUFACTURED" "NOT ADJUSTABLE" ETC. IT HAS NOW BEEN TWO WEEKS SINCE THE LAST FAILURE WAS SHOWN TO GOODYEAR, AND THEY CLAIM NOT TO BE ABLE TO LOCATE A REPLACEMENT. I HAVE COMPLETE DOCUMENTATION OF EACH OF THESE SITUATIONS.

CONTINUE 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 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 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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Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO  
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Signature of Owner \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## VEHICLE INFORMATION

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|--------------------------------------------------------------------------------------------------------------|--------------|---------------|--------------|--------------------------|
| Vehicle Ident. No. (VIN)<br><small>(Location at bottom of<br/>windshield and driver's side<br/>door)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| 1B7KC2360WJ228093                                                                                            | GOODYEAR     | WRANGLER RTS  | 1900         |                          |

|                                                                                            |                                                                                           |                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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| No of Failure<br><b>5</b> | Date(s) of Failure(s) _____<br>Mileage at Failure(s) _____<br>Vehicle Speed at Failure(s) _____ | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><input type="checkbox"/> Yes <input type="checkbox"/> No                |

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| Crash<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
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