



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 197

Date Received

19-MAR-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8005960

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) (Location at bottom of windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
JKAKLEA191A073264		KAWASAKI	KLR650	2001	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ 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
☐ 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
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02492100	Part Name(s) SUSPENSION:MOTORCYCLE REAR SWING ARM PIVOT SHAFT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part's ☐ Original ☐ Replacement
No of Failure 0	Dates of Failure(s) 14-MAR-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) 1450		
	Vehicle Speed at Failure(s) 0		

APPLICATION INCIDENT INFORMATION

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

Crash ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured 0	Number of Fatalities 0	Estimated Property Damag _____	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER HAD NOTICED THE SWING ARM BOLTS HAD BEEN COMING APART FROM MOTORCYCLE FRAME, WICH WAS ATTACHED TO SUSPENSION, AND COULD CAUSE DRIVER TO LOSE CONTROL OF VEHICLE. DEALER HAD BEEN CONTACTED. PLEASE PROVIDE MORE INFORMATION.*AK

COPIES OF THIS FORM ARE:

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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 107 Date Received: 19-MAR-2002 OFFICE DEFECTS INVESTIGATION Reference No. 8005960 Work Number: [REDACTED] Home: [REDACTED]	
OWNER INFORMATION (Type or Print) [REDACTED]			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of [REDACTED] to the vehicle manufacturer. Signature of Owner: [REDACTED] Date: 03/30/02			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
JKAKLEA191A073264	KAWASAKI	KLR650	2001
Current Odometer Reading	1790		
Purchase Date: 06/2001	Dealer's Name: PERFORMANCE KAWASAKI		Engine Size (CID): 650
☒ New ☒ Used	City: TUCSON State: AZ Zip Code: [REDACTED]		No. Cylinders: ONE
Transmission Type: ☒ Manual ☐ Automatic	Antilock Brakes: ☐ Yes ☒ No	Restraint System: ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control: ☐ Yes ☒ No
Drive Type: ☐ Front ☒ Rear ☐ 4-Wheel	Vehicle Type: ☐ Car ☐ Van ☐ Minivan ☐ Other		Body Style: ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component: 02492100	Part Name(s): SUSPENSION: MOTORCYCLE REAR SWING ARM PIVOT SHAFT		Location: ☒ Left ☐ Right ☐ Front ☐ Rear
No. of Failures: 0	Date(s) of Failure(s): 14-MAR-2002 Mileage at Failure(s): 1450 Vehicle Speed at Failure(s): 0		Failed Part(s): ☒ Original ☐ Replacement
Application Incident Information (Please describe in detail the Incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash: ☐ Yes ☒ No	Fire: ☐ Yes ☒ No	Number of Persons Injured: 0	Number of Fatalities: 0
Estimated Property Damage: NONE		Reported to Police: ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER HAD NOTICED THE SWING ARM BOLTS HAD BEEN COMING APART FROM MOTORCYCLE FRAME, WHICH WAS ATTACHED TO SUSPENSION, AND COULD CAUSE DRIVER TO LOSE CONTROL OF VEHICLE. DEALER HAD BEEN CONTACTED. PLEASE PROVIDE MORE INFORMATION.*AK CONSUMER HAS REFITTED (PIVOT SHAFT) BOLTS WITH COTTER PINS SO THEY CANNOT COME APART. I'm IMPRESSED WITH KAWASAKI BUT I FEEL THEY SHOULD DO THIS AT ASSEMBLY			
CONTINUE ON BACK IF NEEDED			
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.			

AND PRODUCTION, IT SEEMS CRITICAL!

AGAIN I THINK KAWASAKI MAKES EXCELLENT

~~THE~~ MOTORCYCLES, THANK YOU.

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National Highway Traffic Safety
Administration
<http://www.nhtsa.dot.gov/online>