



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 758**

Date Received

03-JUN-2002

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

8010927

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) <small>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1GBLP37J3V3314325	FLEETWOOD	BOUNDER	1998			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____

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

Component 01550000 02700000	Part Name(s) STEERING:LINKAGES:TIE ROD:INNER TIRES	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) _____ 15-MAY-2002 Mileage at Failure(s) _____ 23000 Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NIHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Polic <input type="checkbox"/> Yes <input type="checkbox"/> No
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### NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

**FRONT LEFT TIRE WAS WEARING UNEVENLY. AFTER INSPECTION AT DEALERSHIP CONSUMER WAS INFORMED THAT BOLT HOLDING TIE ROD IN PLACE WAS DISCONNECTED.\*AK**

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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CONTINUE ON BACK IF NEEDED

FRONT LEFT TIRE WAS WEARING UNEVENLY. AFTER INSPECTION AT DEALERSHIP CONSUMER WAS INFORMED THAT BOLT HOLDING THE ROD IN PLACE WAS DISCONNECTED. AK FRONT LEFT AND FRONT RIGHT TIRES WERE WORK ON THE INNER SIDE OF THE TIRES. AFTER INSPECTION AT DEALERSHIP CONSUMER WAS INFORMED THAT THE BOLTS HOLDING THE TIE ROD ASSEMBLY WAS LOOSE AND READY TO SNAP. ESTIMATED MILEAGE LEFT WAS 200-300 MILES AND THEREFORE DEADLY CRASH. WE WERE INFORMED THAT...

Crash	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	0	Number of Fatalities	0	Estimated Property Damage	\$1617.25 To Makarhome	Reported to Police	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

No. of Failures	1	Date(s) of Failure(s)	5-MAY-2002	Mileage at Failure(s)	23000	Vehicle Speed at Failure(s)		Failed Part(s)		NHTSA Previously	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Component	0155000	Part Name(s)	STEERING LINKAGES; TIE ROD; INNER TIRES	Location	Front	Failed Parts	Original Replacement	Failed Parts			

Transmission Type	<input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	Articlock Brakes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3-Point Belt	<input checked="" type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	Diverse Airbag	<input type="checkbox"/> Passenger Airbag	Vehicle Type	Car	Engine Size	454 CID/CYL	Engine Cylinders	8	Fuel System	<input checked="" type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Turbo
City	Modesto	State	CA	Zip Code	95356	Dealer's Name	Dan Gamels RV centers	Purchase Date	6/2/98	Used	<input checked="" type="checkbox"/> New <input type="checkbox"/>				

Vehicle Ident. No. (VIN)	1GBLP37J3V3314325	Vehicle Make	FLEETWOOD	Vehicle Model	BOUNDER	Vehicle Year	1998	Current Odometer Reading	23,536
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Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES  NO   
 In the absence of a signature of owner, please print name and address to the vehicle manufacturer. Date 6/16/02

BAY POINT CA		Work Num	758855
OWNER INFORMATION (Type or Print)		Home Num	8010927
U.S. Department of Transportation National Highway Traffic Safety Administration www.nhtsa.dot.gov/hotline 1-888-327-4236 NATIONWIDE 1-888-DASH-2-DOT		Date Received	03-JUN-2002
Vehicle Owner's Questionnaire (VOQ)		DEFECTS INV	8010927
DOT Auto Safety Hotline		FOR AGENCY USE ONLY	758

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

at 23,536 odometer reading This would not had Taken place - and The bolts were not correctly Tightened from Factory.

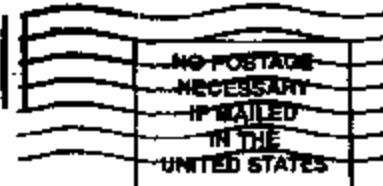
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 75173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation National Highway Traffic Safety Administration DOT Auto Safety Hotline, NSA-10.1 400 7th Street, SW Washington, DC 20590

20590+0001



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

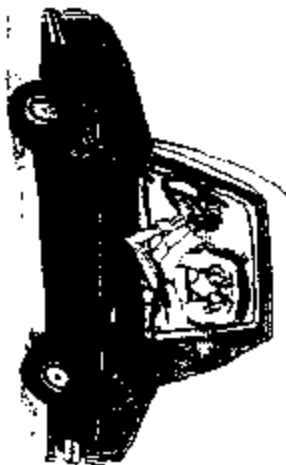
DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



U.S. Department of Transportation National Highway Traffic Safety Administration http://www.safta.dot.gov/hotline