



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 936

Date Received

10-JUN-2002

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

8011360

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		
J3VN39W0N0088883	FIRESTONE	WILDERNESS	1900			
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 type="checkbox"/> Automatic	Antilock Brakes <input 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 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 02750000	Part Name(s) TIRES:LINER	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) 08-JUN-2002 Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA 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)

1992, TOYOTA, 4 RUNNER REPLACEMENT TIRES, P23575R15. RIGHT REAR TIRE STARTED TO MAKE A VERY LOUD NOISE AT 65 MPH. SIDEWALL HAD COME OFF. CAUSE UNKNOWN. PLEASE PROVIDE ANY FURTHER INFORMATION. *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.



DOT Auto Safety Hotline

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

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4235
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY

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Date Received: 10 JUN 2002
 Office: DEFECTS INVEST
 Ref No.: 8011360

OWNER INFORMATION (Type or Print)

[Redacted] 758051
 [Redacted]
 RODCHESTER HILLS MI [Redacted]

Work Number
Home Number

Do you authorize NHTSA to provide a copy of report to 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: John Whaley Date: 6/29/02

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) <u>J3VN39W0N0088883</u>	Vehicle Make <u>TOYOTA</u> <u>FIRESTONE</u>	Vehicle Model <u>4 Runner</u> <u>WILDERNESS</u>	Vehicle Year <u>1992</u> <u>-1900</u>	Current Odometer Reading <u>122967</u>
Purchase Date <u>1-27-99</u>	Dealer's Name <u>Rochester Hills Tire & Service</u>	Engine Siz <u>(CID/CCIL)</u> <u>6</u>	<input type="checkbox"/> Turbo Diesel Gas Fuel Injectio <input checked="" type="checkbox"/> No Cylinders	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City <u>Roch. Hills</u> State <u>MI</u> Zip Code <u>48307</u>	Transmission Type <input checked="" type="checkbox"/> Automatic <input type="checkbox"/> Manual	Antilock Brakes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag
Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Drive Train <input checked="" type="checkbox"/> 4-Wheel <input type="checkbox"/> Front Rear	Vehicle Type <input checked="" type="checkbox"/> Sport UT Truck <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck

Tires
 70,000 miles on vehicle at purchase date
 Various stampings on tire

FAILED COMPONENT(S)/PART(S) INFORMATION

Component <u>02750000</u>	Part Name(s) <u>TIRES:LINER Firestone Wilderness AT</u> <u>(508 DOT-H4HL ST3BJ V09R 027477)</u>	Location <input type="checkbox"/> Left Front <input checked="" type="checkbox"/> Right Rear	Failed Part(s) <input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>08 JUN 2002</u> Mileage at Failure(s) <u>122,500</u> Vehicle Speed at Failure(s) <u>65 mph</u>	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA 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 Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

1992, TOYOTA, 4 RUNNER REPLACEMENT TIRES, P23575R15. RIGHT REAR TIRE STARTED TO MAKE A VERY LOUD NOISE AT 65 MPH. SIDEWALL HAD COME OFF. CAUSE UNKNOWN. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

CONTINUE ON BACK IF NEEDED