



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

18-JUN-2002

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

Reference No.

8011996

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		
T31G204773GKFK16	WILDERNESS	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 02740000	Part Name(s) TIRES:TREAD	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) 18-JUN-2002 Mileage at Failure(s) 21700 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)

ORIGINAL TIRES ON GMC, YUKON, 26575R161 LE; WHILE TRAVELING AT 30MPH FRONT RIGHT TIRE BLEWOUT WITHOUT WARNING. THERE WAS NOTHING SHARP ON THE ROAD, TREAD SEPARATED FROM SIDEWALL. PLEASE PROVIDE ANY FURTHER INFORMATION.\*AK

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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.

**OWNER INFORMATION (Type or Print)**  
 GEORGE  
 6483 S.W. 131 ST., # 1  
 MIAMI  
 Home Number: [REDACTED]  
 Work Number: [REDACTED]  
 Reference No. 8011996

**VEHICLE INFORMATION**  
 Vehicle Identification No. (VIN) (located at front of windshield on driver's side): T31G204773GKFK16  
 Vehicle Make: WILDERNESS  
 Vehicle Model: WILDERNESS  
 Vehicle Year: 2001  
 Current Odometer Reading: 22,000  
 Purchase Date: JAN 2001  
 Dealer's Name: Auto City  
 City: Homestead  
 State: FL  
 ZIP Code: [REDACTED]  
 Engine Size (CID/CCL): 5.3L  
 Turbo:  Diesel:  Gas:  Fuel Injectio:

**FAILED COMPONENT(S)/PART(S) INFORMATION**  
 Component: 02740000  
 Part Name(s): TRES:TREAD  
 Location:  Front  Left  Right  
 Failed Parts:  Original  Replacement  
 Date(s) of Failure(s): 13-JUN-2002  
 Mileage at Failure(s): 21700  
 Vehicle Speed at Failure(s): 35  
 No of Failures: [REDACTED]  
 Transmission Type:  Automatic  Manual  
 Restraint System:  3-Point Belt  2-Point Belt  Motorbelt  
 Brakes:  Antilock Brakes  Cruise Control  
 Drive Type:  Front  Rear  4-Wheel  
 Vehicle Type:  Car  Van  Minivan  Other  
 Body Style:  2-Door  4-Door  Stationwagon  Pick Up  Truck

**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: [REDACTED]  
 Number of Fatalities: [REDACTED]  
 Estimated Property Damage: [REDACTED]  
 Reported to Police:  Yes  No

**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**  
 ORIGINAL TIRES ON GMC, YUKON, 2655R161 LE; WHILE TRAVELING AT 30MPH FRONT RIGHT TIRE BLEWOUT WITHOUT WARNING. THERE WAS NOTHING SHARP ON THE ROAD, TREAD SEPARATED FROM SIDEWALL. PLEASE PROVIDE ANY FURTHER INFORMATION.\*AK  
 - RESPONSE NOT RESPONDING TO MY CALLS  
 - FURTHER DESIGN POOL ALL TIRES CLAIM THERE WAS A PROBLEM IN THE CHECKED AT GAS STATION  
 - AMTRES FALON TO INCIDENT NO LEAK  
 CONTINUE ON BACK IF NEEDED

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