



U.S. Department of Transportation

National Highway Traffic Safety Administration

**DOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)**

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 255

Data Received
01-MAR-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.
857704

Work Number _____
Home Number **805 643 4063**

OWNER INFORMATION (Type or Print)

JOE KEARNS 593146
2965 SIOUX AVE.
VENTURA CA 93001

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>(Listed at top of windshield or driver's side)</small>	Vehicle Make ISUZU TRUCK	Vehicle Model TROOPER	Vehicle Year 1986	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Diesel
			<input type="checkbox"/> Gas
			<input type="checkbox"/> Fuel Injection

Transmission Type <input type="checkbox"/> Manual	Antilock Brakes <input type="checkbox"/> Yes	Restraint System <input type="checkbox"/> 3-Point Belt	Cruise Control <input type="checkbox"/> _____	Drive Train <input checked="" type="checkbox"/> Front	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport Util	Body Style <input type="checkbox"/> 2-Door
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