

U.S. Department  
of TransportationNational 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 197

Date Received

14-APR-2000

 Od\_or \_\_\_\_\_  
 rt\_dt \_\_\_\_\_  
 od\_rt \_\_\_\_\_  
 up\_ltr \_\_\_\_\_

Reference No.

860366

 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 front of windshield or drivers side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
4A3ECT64U5ME10778	MITSUBISHI	ECLIPSE	1991	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input checked="" type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

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

Component 07360000	Part Name(s) POWER TRAIN TRANSFER CASE (4-WHEEL DRIVE)	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 Failures 0	Date(s) of Failure(s) 12-APR-2000 Mileage at Failure(s) 70000 Vehicle Speed at Failure(s) 0	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <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 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	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)

WHILE DRIVING ABOUT ANY SPEED THE VEHICLE COULD START SHAKING WITHOUT A WARNING AND LOSING CONTROL JUST LIKE IN RECALL 98V069000/ TRANSFER CASE. \*AK

CONTINUED ON BACK PLEASE

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				FOR AGENCY USE ONLY 197	
 U.S. Department of Transportation National Highway Traffic Safety Administration		<b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		Date Received <b>00 JUN 20 PM</b> <b>14-APR-2000</b> <b>OFFICE</b> <b>DEFECTS INVESTIGATION</b>	
OWNER INFORMATION (Type or Print)				Od. or <b>1003</b> od. rt up. nr Reference No. <b>860366</b>	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Signature of Owner				Date <b>5/15/2000</b>	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) <small>(located at bottom of windshield on driver's side)</small>		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
<b>4A3ECT64U5ME107782</b>		<b>MITSUBISHI</b>	<b>ECLIPSE</b>	<b>1991</b>	<b>77,000</b>
Purchase Date	Dealer's Name		Engine Size (CID/CC/L)	<input checked="" type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____		No. Cylinders <b>4 cyl.</b>		
Transmission Type	Antilock Brakes	Restraint System		Cruise Control	Drive Train
<input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel
				Vehicle Type	
				<input checked="" 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 checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component	Part Name(s)		Location		Failed Part(s)
<b>07360000</b>	<b>POWER TRAIN TRANSFER CASE (4-WHEEL DRIVE)</b> <i>Yoke, transmission damage</i>		<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear		<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s)		Failed Part(s) Available?		NHTSA Previously Contacted?
<b>0</b>	<b>12-APR-2000</b> Mileage at Failure(s) <b>77000</b> Vehicle Speed at Failure(s) <b>0</b>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>0</b>	<b>0</b>	<b>\$ 2,000</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
<b>WHILE DRIVING ABOUT ANY SPEED THE VEHICLE COULD START SHAKING WITHOUT A WARNING AND LOSING CONTROL JUST LIKE IN RECALL 98V069000/ TRANSFER CASE. *AK</b> <i>Noticed Leakage under the transfercase.</i>					
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.					

# Leesville Auto Wreckers, Inc.

P. O. BOX 3848 - LEESVILLE AVENUE - RAHWAY, N. J. 07065

Area Code (732) 388-0783 FAX (732) 388-2887



DASH0000

CASH

Apr 14, 2000  
03:31 PM

1 TCS-55577 TRANSFER CASE ASSE 95 EAGLE TALON 2DR WHITE \$ 450.00  
VIN - AE3AL54FBSE227877 MILEAGE - 065594 STK # - 992823

Sub Total	\$	450.00
Sales Tax	\$	27.00
Total Amt	\$	477.00

GMJ

L383263

\*SOLD SUBJECT TO TERMS LISTED ON THE REVERSE SIDE OF RECEIPT\*

**BELL MITSUBISHI, Inc.**

1500 Rts.1 South  
 RAHWAY, N.J. 07065  
 Tel. (732)388-8843  
 Fax (732) 388-8638



NO REFUND WITHOUT THIS INVOICE.  
 NO RETURNS AFTER 10 DAYS.  
 NO RETURNS ON ELECTRICAL ITEMS OR SPECIAL ORDERS.  
 25% HANDLING CHARGE ON ALL RETURNED ITEMS.

DATE ENTERED 17 APR 00	YOUR ORDER NO.	DATE SHIPPED 17 APR 00	INVOICE DATE 17 APR 00	INVOICE NUMBER 93454
ACCOUNT NO. 4			PAGE 1 OF 1	

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SHIP VIA		INSTR.	EX. NO.	TERMS	F.O.B.			
		7		CASH-RET	RAHWAY NJ			
QTY	DRD	SHIP	E.O.	PART NUMBER	DESCRIPTION	LIST	NET	AMOUNT
1				MD128901	GASKET, T/C	4.40	4.40	4.40
				*** ABOVE PART IS PREPAID ***				
1				MRI11611	YOKE, PROPE	48.46	48.46	48.46
				*** ABOVE PART IS PREPAID ***				
The following parts have been special ordered:								
1				MD128901	GASKET, T/C			
				MRI11611	YOKE, PROPE			
**** THANK YOU FOR CHOOSING BELL **** ***** FOR YOUR MITSUBISHI PARTS ***** *** WE TAKE PRIDE IN OUR SERVICE *** * CALL US AND SEE HOW WE CAN HELP YOU * **** ASK FOR... JOB, RAUL, & JEFF ****							PARTS 52.86 DUNLEY FREIGHT 0.00 SALES TAX 3.17 TOTAL 56.03	

## DISCLAIMER OF WARRANTIES

Any warranties on the products sold hereby are those made by the manufacturer. The Seller, BELL AUTO SALES, Inc. hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and BELL AUTO SALES, Inc. neither assumes nor authorizes any other person to assume for it any liability in connection with the sale hereon on the invoice.

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