



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

**NATIONWIDE 1-888-DASH-2-DOT**  
**1-888-327-4236**  
[www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

**FOR AGENCY USE ONLY 255**

Date Received <b>23-AUG-2000</b>	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
Reference No. <b>868390</b>	

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>(located at bottom of windshield or driver's side)</small>	Vehicle Make <b>FIRESTONE</b>	Vehicle Model <b>FIREHAWK ATX</b>	Vehicle Year <b>1900</b>	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	<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 <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inflator Bell <input type="checkbox"/> 2-Point Belt	Cruise Control <input type="checkbox"/> Yes <input checked="" 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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Utl Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other
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**FAILED COMPONENT(S)/PART(S) INFORMATION**

Component <b>Q2700000</b>	Part Name(s) <b>TIRES</b>	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available?   Yes   No	NHTSA Previously Contacted?   Yes   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)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" 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)**

**THIS FIRESTONE TIRE ON AN CHEVROLET PICKUP 311050R15 HAD THE TREAD SEPERATION PROBLEM. FIRESTONE REPLACED ALL FOUR OF THESE TIRES.**

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.



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**FOR AGENCY USE ONLY 255**

Date Received: 00 SEP 21 AM 9:01  
 23-AUG-2000  
 OFFICE DEFECTS INVESTIGATION

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

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED] 487  
 Work Num: [REDACTED]  
 Home Num: [REDACTED]

Reference No. 868380

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  
 In the absence of a signature, name and address to the vehicle manufacturer.

Signature of Owner: [REDACTED] Date: 9/12/00

YES  NO

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN): (Located at bottom of windshield on driver's side) 1GCEK14HXBF39461  
 Vehicle Make: FIRESTONE  
 Vehicle Model: FIREHAWK ATX  
 Vehicle Year: 1992  
 Current Odometer Reading: 182,000

Purchase Date: 1981 (VEHICLE)  
 Dealer's Name: 3110SR15  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

New  Used

Engine Size (CID/CCIL): 305 V-8  
 No. Cylinders: \_\_\_\_\_

Turbo  Diesel  Gas  Fuel Injection

Transmission Type:  Manual  Automatic

Antilock Brakes:  Yes  No

Restraint System:  3-Point Belt  Motorbelt  Driverside Airbag  2-Point Belt  Passengerside Airbag

Cruise Control:  Yes  No

Drive Train:  Front  Rear  4-Wheel

Vehicle Type:  Car  Sport Lift  Van  Truck  Minivan  Motorcycle  Other

Body Style:  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

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

Component: 02740000  
 Part Name(s): TIRES TREAD ON FIREHAWKS ATX 3110SR15  
 Location:  Left  Right  Front  Rear  
 Failed Part(s):  Original  Replacement

No. of Failures: ALL TIRES GOING BAD (ONLY 1 BLAST)

Date(s) of Failure(s): 7/21/00  
 Mileage at Failure(s): 24,336 MI & 19,290 MI  
 Vehicle Speed at Failure(s): 55 MPH

Failed Part(s) Available?  Yes  No  
 NHTSA Previously Contacted?  Yes  No

**APPLICATION INCIDENT INFORMATION**

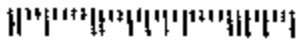
(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash:  Yes  No  
 Fire:  Yes  No  
 Number of Persons Injured: NONE  
 Number of Fatalities: NONE  
 Estimated Property Damage: \_\_\_\_\_  
 Reported to Police:  Yes  No

**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

FIRESTONE TIRES ON AN CHEVROLET PICKUP 311050R15 HAD TREAD SEPARATION PROBLEM. FIRESTONE REPLACED ALL FOUR OF THESE TIRES.\*AK  
 BOUGHT (2) FIREHAWK ATX 3110SR15 IN 1995 & (2) IN 1996. HAD ONLY 24,336 MI & 19,290 MI RESPECTFULLY ON TIRES. HAD BLOWOUT ON LEFT REAR TIRE ON JULY 21, 2000. LUCKILY, I DID NOT HAVE MY THREE SMALL CHILDREN IN THE TRUCK WITH ME AT THIS TIME. TIRES ALSO WAS MINOR DAMAGE TO FENDER & EXHAUST SYSTEM ON TRUCK WHICH I HAD TO PAY TO GET FIXED. ACCIDENT OCCURED ON INTERSTATE & HAD TRUCK

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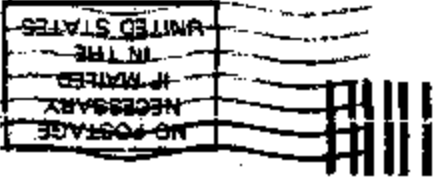


U.S. Department of Transportation  
 National Highway Traffic Safety Administration  
 Information Management Staff NSA-10.01  
 400 7th Street, SW  
 Washington, DC 20590

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN

**BUSINESS REPLY MAIL**  
 FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

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



U.S. G.P.O. FORM 3849-001 (00/00)

WASHINGTON, MD 20711

4016 NOKHUSVILLE RD.  
 P.O. # 833-9000  
 (15)

TIPS BOUNTY AT: FIRESTICK TIPS & SERVICE COURSE

TOUO TO FIRESTICK SERVICE COURSE WHERE I OBTAIN MY BOUNTY TIPS  
 FIRESTICKS DEPOSITED ALL TIPS ON SUM 21, 2000. MY COST - \$ 501.28  
 BUT THE PROGRAMS WITH FIRESTICK TIPS DIDNT COME OUT IN THE  
 NEWS UNTIL AROUND THE FIRST OF AUGUST 2000. SO AT THIS TIME,  
 I AM TRYING TO RECOVER SOME OF THE COST AND MY TIPS!

THE IDENTIFICATION NO. \*

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MANUFACTURER/TIRE NAME  
 FIRESTICK (FIRESTICK ATV TOURS) | 310521S  
 SIZE

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE):

Fold to show Return Address (no stamp needed). Fasten with tape or staple and mail.

DO NOT WRITE DOT # BECAUSE FIRESTICKS DEPOSITED ALL TIPS!

NARRATIVE DESCRIPTION (CONTINUED)

\* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.