

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 241

Date Received

28-AUG-2000

 Ocl_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

868954

 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 driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
PLEASE FILL IN	FIRESTONE	STEELTEX	1900	

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 checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<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 checked="" type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Par. Name(s) TIRES:TREAD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s) 08-AUG-2000 Mileage at Failure(s) 43000 Vehicle Speed at Failure(s) _____	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	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				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

PE 00 020/TIRE TREAD SEPARATION: RIGHT REAR TIRE EXPERIENCED A TREAD SEPARATION WHILE TRAVELING AT HIGHWAY SPEED OF 65 MPH, DRIVER AND THREE PASSENGERS IN A 1995, CHEVROLET SUBURBAN. ORIGINAL EQUIPMENT; P245/75R16; AND DOT# VN11B1A165. NO INJURY REPORTED AND FIRESTONE NOTIFIED. PLEASE PROVIDE ANY FURTHER DETAILS*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.

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Date Received: 00 SEP 28 AM 11:28-AUG-2000
 OFFICE: EFFECTS INVESTIGATION

Ref. No.: 868954

Work Number: _____
 Home: _____

OWNER INFORMATION (Type or Print)

[Redacted] 831832

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
 In the absence of _____ and address to the vehicle manufacturer.
 Signature of Owner: _____ Date: 9/12/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN): (Located at bottom of windshield on driver's side)
 3E4GCAGN7SG101806
 PLEASE FILL IN

Vehicle Mak: FIRESTONE
 Vehicle Mode: STEELTEX
 Vehicle Year: 1900
 Current Odometer Reading: 44304

Purchase Date: _____ Dealer's Name: _____
 City: _____ State: _____ Zip Code: _____

New Used

Engine Siz (CID/CC/L): _____ No Cylinders: 8
 Turbo Diesel Gas Fuel Injectio

Transmission Type: Manua Automatic
 Antilock Brakes: Yes No
 Restraint System: 3-Point Belt Motorbelt
 Driverside Airbag 2-Point Bel
 Passengerside Airbag
 Cruise Control: Yes No
 Drive Train: Front Rear 4-Wheel
 Vehicle Type: Car Van Minivan Other
 Sport Ult Truck Motorcycle
 Body Style: 2-Door 4-Door Stationwagon Pick Up Truck Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 02740000 Part Name(s): TIRES:TREAD
 Location: Left Front Right Rear Original Replacemen

No of Failures: 1
 Date(s) of Failure(s): 05-AUG-2000
 Mileage at Failure(s): 43000
 Vehicle Speed at Failure(s): 65
 Failed Part(s): Yes No
 NHTSA Previously: 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: 0
 Number of Fatalite: 0
 Estimated Property Damag: _____
 Reported to Polic: Yes No

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

PE 00 020/TIRE TREAD SEPARATION: RIGHT REAR TIRE EXPERIENCED A TREAD SEPARATION WHILE TRAVELING AT HIGHWAY SPEED OF 65 MPH, DRIVER AND THREE PASSENGERS IN A 1995, CHEVROLET SUBURBAN. ORIGINAL EQUIPMENT; P245/75R16; AND DOT# VN11B1A165. NO INJURY REPORTED AND FIRESTONE NOTIFIED. PLEASE PROVIDE ANY FURTHER DETAILS*AK