

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 252

Date Received

08-SEP-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

869751

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	Vehicle Model	Vehicle Year	Current Odometer Reading
	GMC	SIERRA	1989	

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 <input type="checkbox"/> 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 02740000	Part Name(s) TIRES: TREAD	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) 01-JUL-2000 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 checked="" type="checkbox"/> Yes <input 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)

PE00 020 SHE WAS TRAVELING ABOUT 50MPH ON THE HIGHWAYHE SAID THAT HE HEARD THE TIRE TREND FLAPPING AGAINST THE UNDER WELL OF THE VEHICLE. THE RIGHT REAR PASSENGER TIRE TREND SEPARTED. THE TIRE WAS A FIRESTONE P23675R16 M/S THE CONSUMER WASN'T HURT. AND ALSO THE CONSUMER CONTACTED FIRESTONE.

CONTINUED 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.

DOT Auto Safety Hotline		FOR APPROVAL ONLY		252	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline		Date Received 00 OCT -2 AM 11:12 08-SEP-2000 OFFICE DEFECTS INVESTIGATION	
OWNER INFORMATION (Type or Print)		Reference No.		869751	
[REDACTED]		Work Number		[REDACTED]	
Home [REDACTED]		Date		9/26/00	
Do you authorize the manufacturer of your vehicle?		<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
Signature of Owner [REDACTED]		Date		9/26/00	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)		Vehicle Mak	Vehicle Mode	Vehicle Year	Current Odometer Reading
2GTEC19K9K1511298		GMC	SIERRA	1999	115954
Purchase Date		Dealer's Name		Engine Size (CID/CC)	Turbo Diesel Gas Fuel Injectio
1995		Allens Used Cars		350	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used		City	State	Zip Code	No Cylinders
King		NC	27021	8	8
Transmission Type	Antilock Brakes	Restraint System		Cruise Control	Drive Train
<input type="checkbox"/> Manua <input checked="" 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"/> Motorbelt <input type="checkbox"/> 2-Point Belt		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel
Vehicle Type	Body Style	Sport Utl Truck	2-Door	4-Door	Stationwagon
<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input checked="" type="checkbox"/> Pick Up <input type="checkbox"/> Truck	Motorcycle	Stationwagon	Pick Up	Truck
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component	Part Name(s)		Location		Failed Part(s)
02740000	TIRES:TREAD		<input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Rear		<input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s)		Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s)
	01-JUL-2000				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					NHTSA Previously <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0	0	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
PE00 020; CONSUMER WAS TRAVELING ABOUT 50MPH ON THE HIGHWAY AND HEARD A NOISE, TIRE TREAD FLAPPING AGAINST UNDER WELL OF VEHICLE. RIGHT REAR PASSENGER'S TIRE TREAD SEPARATED. TIRE WAS A FIRESTONE, P23575R15 M/S. CONSUMER WASN'T HURT. CONSUMER CONTACTED FIRESTONE.*AK					
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.					

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

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

DOT	AYHA 19A	MANUFACTURER/TIRE NAME	Firestone	SIZE	P325 75R15
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* 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.

NARRATIVE DESCRIPTION (CONTINUED)

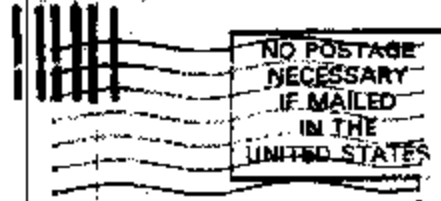
The 2 front tires separated and were replaced 10-2-99 - The tire the tread came off & still HAWK, AND THE 4th TIRE IS STILL ON THE TRUCK. Stokes tire in King, NC was the Dealer The Tires came from.

U.S. G.P.O. 1992 - 625-017/80286

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



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

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

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

