

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

09-SEP-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

870071

 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 front of windshield or drivers side)</small> | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Reading |
| PLEASE FILL IN | COOPER | COOPER | 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 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 02700000 | Par. Name(s) TIRES | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear | Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No. of Failures | Date(s) of Failure(s) 17-AUG-2000 Mileage at Failure(s) 200000 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 <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 |
|--|---|---------------------------|----------------------|---------------------------|---|

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

CONSUMER WAS UNABLE TO BALANCE TIRES ON A 1978, CHEVROLET, EL CAMINO. AFTERMARKET EQUIPMENT; P205/75R14; DOT# UNAVAILABLE. FEEL FREE TO 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.

| | | | | | |
|--|--|--|---------------------------------|---|---|
|  <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p> | | <p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p> | | <p>FOR EXEMPT USE ONLY 241</p> | |
| <p>Date Received 00 SEP 28 PM 1:57 09-SEP-2000 OFFICE DEFECTS INVESTIGATION</p> | | <p>Od or rt dt od rt up_itr</p> | | <p>Reference No. 870071</p> | |
| <p>OWNER INFORMATION (Type or Print)</p> | | | | <p>Work Number</p> | |
| <p>Signature of Owner: [Redacted] 636077</p> | | | | <p>Home Number: [Redacted]</p> | |
| <p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? in the absence of [Redacted] your name and address to the vehicle manufacturer.</p> | | | | <p><input type="checkbox"/> YES <input type="checkbox"/> NO Date 8/29/2000</p> | |
| <p>VEHICLE INFORMATION</p> | | | | | |
| <p>Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) PLEASE FILL IN</p> | | <p>Vehicle Make COOPER</p> | <p>Vehicle Model COOPER</p> | <p>Vehicle Year 1900</p> | <p>Current Odometer Reading 93434</p> |
| <p>Purchase Date 8-11-00 <input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p> | | <p>Dealer's Name WILDON TIRE CORP City Dubuque State IA Zip Codes 52002</p> | | <p>Engine Siz (CID/CC/L) 350 No Cylinders 8 <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio</p> | |
| <p>Transmiss on Type <input type="checkbox"/> Manua <input checked="" type="checkbox"/> Automatic</p> | | <p>Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | | <p>Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> 2-Point Bel</p> | |
| <p>Cruise Contro <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | | <p>Drive Trai <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p> | | <p>Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input type="checkbox"/> Sport Lift Truck <input type="checkbox"/> Motorcycle</p> | |
| <p>FAILED COMPONENT(S)/PART(S) INFORMATION</p> | | | | | |
| <p>Component 02700000</p> | | <p>Part Name(s) TIRES</p> | | <p>Location <input checked="" type="checkbox"/> Left Front <input checked="" type="checkbox"/> Right Rear</p> | |
| <p>No of Failures 3</p> | | <p>Date(s) of Failure(s) 17-AUG-2000 Mileage at Failure(s) 200000 Vehicle Speed at Failure(s) 45 TO 55</p> | | <p>Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| <p>NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | | | | | |
| <p>APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)</p> | | | | | |
| <p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | | <p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | | <p>Number of Persons Injured</p> | |
| <p>Number of Fatalitie</p> | | <p>Estimated Property Damag</p> | | <p>Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> | |
| <p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p> | | | | | |
| <p>CONSUMER WAS UNABLE TO BALANCE TIRES ON A 1978, CHEVROLET, EL CAMINO. AFTERMARKET EQUIPMENT; P205/75R14; DOT# UNAVAILABLE. FEEL FREE TO PROVIDE ANY FURTHER DETAILS. *AK COOPER TIRES INSTALLED ON LH & RH FRONT would NOT BALANCE & CAUSED MY CAR TO VIBRATE - BALANCED 3 TIMES & RH. FWD TIRE REPLACED ALL WITHIN 500 MILES FROM 8-11-00 ODOMETER READ 82865 TO 8-24-00 ODOMETER READ 93434. PREVIOUS TO REPLACING THE 2 FRONT TIRES (THE OLD TIRES) I HAD NO BALANCE PROBLEMS - TO CORRECT THE BALANCE PROBLEM - THE DEALER INSTALLED ANOTHER BRAND OF TIRES & ALL PROBLEMS WERE SOLVED.</p> | | | | | |
| <p>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 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.</p> | | | | | |

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 UTKCC4D1900

MANUFACTURER/TIRE NAME
COOPER

SIZE
P205/75R14

* 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. X44

NARRATIVE DESCRIPTION (CONTINUED)

PLEASE NOTE: YELLOW Receipt enclosed.

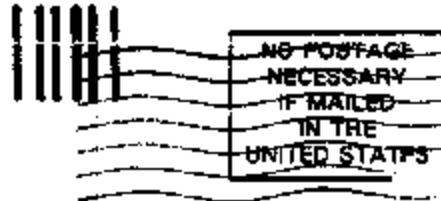
& article in the Dubuque Telegraph Herald & T.D.
8-25-2000 - This one day after my tire
problem.

☆ U.S. G.P.O.: 1992-623-887 / 80086

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
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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



Former workers question safety of Cooper tires

Mississippi plant: They testify that they used sharp tools to remove bubbles

CHICAGO (AP) - Former workers for Ohio-based Cooper Tire & Rubber Co. say shoddy quality control might have caused tire problems similar to those cited in the recent Bridgestone/Pirelli recall.

The Chicago Sun-Times reported Thursday that former workers from the Cooper plant in Tupelo, Miss., testified this year they used sharp tools to poke holes in tires to remove bubbles. They also said that solvents were used to make old rubber easier to mold into shape.

Harry Baumgardner, a former Firestone engineer and product line manager, said the practices could lead to tire failure.

"I would never recommend it," he said.

More than 50 lawsuits have been filed nationwide against Firestone, Ohio-based Cooper by people who say their tires failed, the newspaper reported. It said other tire makers also have had problems with the rubber tread peeling away from steel belts.

Cooper officials said Thursday the number of

lawsuits against the company is significantly less than what was reported.

"We have not had any cases where it was proven our manufacturing process or design was defective," said company spokesman Roger Hendricksen. Both manufacturing practices questioned by the workers have been deemed to be safe although Cooper no longer allows employees to use sharp tools to remove bubbles, he said.

That was stopped in 1995 after a tire dealer found a puncture hole in a tire tube, Hendricksen said.

"It was a single instance," he said. "The tire never left the shop and it never touched the road." Cooper has no evidence that any other punctured tire left its factories, he said.

Employees still use the solvents, "It's a safe procedure and authorized in all of our plants," Hendricksen said.

A vast majority of tire failures can be blamed on factors such as road punctures, excessive wear, high speeds and low air pressure, he said.

The former workers who testified were found by three lawyers handling a case in Arkansas in which tread failure caused a car to cross the center line and hit an oncoming car in May 1998. The drivers of both cars and two passengers were killed.

Illinois
 Friday, August 25, 2000
 Telegraph Herald



*8/29/2000 at office
 Pirelli plant, on 10/11/00*

*1-800-533-1131
 588-5611*

WELDON TIRE CORP.
 1247 Century Drive
 BUQUE, IOWA 52002-3770
 (91) 582-3991 556-8288

DATE OF ORDER 8-24-00
 106092

WELDON TIRE CORP.
 8-24-00

CITY, STATE, ZIP: [REDACTED] EST: [REDACTED]
 WORK PHONE: [REDACTED]
 CUSTOMER'S CARRIER NUMBER: [REDACTED]
 ORDER WRITTEN BY: [REDACTED]
 LICENSE NUMBER: [REDACTED]
 DATE PURCHASED: [REDACTED]
 AMOUNT: 234.34

| QTY | FART NO. AND DESCRIPTION | AMOUNT |
|-----|--------------------------|--------|
| | COOPER | |
| | WTR C4D1900 | |
| | SWP 8-11-00 | |
| | 93805 | |
| | 37 miles of tires | |
| | MICHELIN | |
| | ART BAY 488 | |
| | TOTAL PARTS | |
| | ACCESSORIES | |
| | TOTAL ACCESSORIES | |

DESCRIPTION OF WORK:
 WBE CHG OIL OIL FILTER TUNE UP TRANS. OIL
 2 Fronts by hand
 2 Backs by hand
 ADD 265 Tires +
 265 7.50's
 265 7.50's
 265 7.50's
 265 7.50's

LITERS/GALS. OF GAS @
 LITERS/GALS. OF OIL @
 KOLBS. OF GREASE @

TOTAL LABOR
 TOTAL PARTS
 ACCESSORIES
 GAS, OIL AND GREASE
 TRAVEL REPAIRS
 FEM/WASTE DISPOSAL
 TAX
 TOTAL 234.34

1. I hereby authorize the above repair work to be done along with the necessary maintenance you and your employees may operate above. I understand that you will be responsible for the use of any parts or materials left in case of an accident or damage to my car or other property beyond your control. I am responsible for the use of any other cause beyond your control in case of an accident or damage to my car or other property beyond your control.

THANK YOU