
 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>DOT Auto Safety Hotline</p> <h2>Vehicle Owner's Questionnaire (VOQ)</h2> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p><b>FOR AGENCY USE ONLY</b> 151</p>	
		<p>Date Received <b>12-SEP-2000</b></p>		<p>Od_or _____ rt_dt _____ od_rt _____ up_ltr _____</p>	
<p>OWNER INFORMATION (Type or Print)</p>				<p>Reference No. <b>870240</b></p>	
<p><b>RICHARD CHAPMAN 637426</b></p>		<p><b>5607 COLLEGE RD. UNIT 101</b></p>		<p>Work Number _____</p>	
<p><b>KEYWEST FL 33040</b></p>		<p>Home Number <b>305 294-1736</b></p>		<p>_____</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.</p>					
<p>Signature of Owner _____ Date ____/____/____</p>					
<p><b>VEHICLE INFORMATION</b></p>					
<p>Vehicle Ident. No. (VIN.) _____ <small>(located at bottom of windshield or driver's side)</small></p>		<p>Vehicle Make <b>FIRESTONE</b></p>	<p>Vehicle Model <b>STEEL TEX</b></p>	<p>Vehicle Year <b>1900</b></p>	<p>Current Odometer Reading _____</p>
<p>Purchase Date _____</p>	<p>Dealer's Name _____</p>		<p>Engine Size _____ (CID/CC/L)</p>	<p><input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection</p>	<p><input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p>
<p>City _____ State _____ Zip Code _____</p>	<p>No. Cylinders _____</p>	<p>Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic</p>	<p>Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Inflator</p>	<p>Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear</p>	<p>Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Sport Util Truck</p>	<p>Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door</p>	<p>_____</p>	<p>_____</p>	<p>_____</p>

 <b>DOT Auto Safety Hotline</b> U.S. Department of Transportation <b>National Highway Traffic Safety Administration</b>		<b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		<b>FOR AGENCY USE ONLY 151</b>	
<b>OWNER INFORMATION (Type or Print)</b> [Redacted]		<b>Date Received</b> 12-SEP-2000		<b>Od_or</b> _____ <b>rt_dt</b> _____ <b>od_rt</b> _____ <b>up_tr</b> _____	
<b>Signature of Owner</b> _____		<b>Work Number</b> _____		<b>Reference No.</b> 870240	
<b>VEHICLE INFORMATION</b>					
<b>Vehicle Ident. No. (VIN.)</b> (Located at bottom of windshield on driver's side)		<b>Vehicle Mak</b> FIRESTONE	<b>Vehicle Mode</b> STEEL TEX	<b>Vehicle Year</b> 1900	<b>Current Odometer Readin</b>
<b>Purchase Date</b>	<b>Dealer's Name</b> _____		<b>Engine Siz (CID/CC/L)</b> _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio	<b>No Cylinders</b> _____
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	<b>City</b> _____ <b>State</b> _____ <b>Zip Code</b> _____		<b>Transmission Type</b> <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<b>Antilock Brakes</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Restraint System</b> <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 Bel
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<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 Util 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
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
<b>Component</b> 02740000	<b>Part Name(s)</b> TIRES:TREAD		<b>Location</b> <input type="checkbox"/> Left Front <input type="checkbox"/> Right Rear	<b>Failed Part(s)</b> <input type="checkbox"/> Original <input type="checkbox"/> Replacement	
<b>No of Failures</b>	<b>Date(s) of Failure(s)</b> _____ <b>Mileage at Failure(s)</b> _____ <b>Vehicle Speed at Failure(s)</b> _____		<b>Failed Part(s) Available?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>NHTSA Previously</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>APPLICATION INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form.)					
<b>Crash</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Fire</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>Number of Persons Injured</b>	<b>Number of Fatalitie</b>	<b>Estimated Property Damag</b>	<b>Reported to Polic</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>					
WHILE DRIVING AT 70MPH TREAD SEPARATED FROM 3/4 THE WAY OFF THE LEFT REAR TIRE. TIRE DID NOT DEFLATE. TIRES WERE REPLACED. *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 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.					

RECEIVED

Form Approved O.M.B. No. 2127-0306



U.S. Department of Transportation  
National Highway Traffic Safety Administration

# Vehicle Owner's Questionnaire (VOQ)

DOT Auto Safety Hotline  
NATIONWIDE 1-888-DASH-2-DOT  
1-888-327-4236  
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 151

Date Received: 12 SEP 2000  
OFFICE: INVT-340

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

Reference No.  
870240

### OWNER INFORMATION (Type or Print)

637426

Work Number

Home Number

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 9/25/00

### VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 1FDLE40S3VHA06693  
Vehicle Make FORD FIRESTONE  
Vehicle Model STEEL TEX  
Vehicle Year 1997 1900  
Current Odometer Reading 27,081

Purchase Date JULY 97  
Dealer's Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Engine Siz (CID/CC/L) \_\_\_\_\_  
No Cylinders V-10  
 Turbo Diesel Gas Fuel Injectio

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

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

Component 02740000  
Part Name(s) TIRES:TREAD PEELED OFF  
Location  Left  Right  Front  Rear  
Failed Part(s)  Original  Replacement

No of Failures 1  
Date(s) of Failure(s) 9/28/00  
Mileage at Failure(s) 27,081  
Vehicle Speed at Failure(s) 70 mph - Interstate  
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 \_\_\_\_\_  
Number of Fatalitie \_\_\_\_\_  
Estimated Property Damag \_\_\_\_\_  
Reported to Polic  Yes  No

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

WHILE DRIVING AT 70MPH TREAD SEPARATED FROM 3/4 THE WAY OFF THE LEFT REAR TIRE. TIRE DID NOT DEFLATE. TIRES WERE REPLACED. \*AK IMMEDIATELY AT A COST OF 1050.00

CONTINUE ON BACK IF APPROPRIATE

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

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.\*

D O T V N 1 1 1 X A

MANUFACTURER/TIRE NAME  
FIRESTONE/STEELTEX RADIAL R4S

SIZE  
LT 275/75 R16 1/2

\* 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)



★ U.S. G.P.O. 1992-623-887/60886

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



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**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

