

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

118

Date Received

13-SEP-2000

Od_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

870751

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
	FIRESTONE	STEEL TEX	1900	

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	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"/> Driver Side Airbag <input type="checkbox"/> Passenger Side Airbag <input type="checkbox"/> Inflator Bell <input 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 Utl <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Part Name(s) TIRES: TREAD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures	Date(s) of Failure(s) 17-SEP-2000	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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)

PE00020; TIRE TREAD SEPARATION: WHILE DRIVING AT 60 MPH TREAD ON THE OUTSIDE DRIVER'S SIDE REAR TIRE CAME OFF. DRIVER WAS ABLE TO CORRECT THE PROBLEM. VEHICLE WAS A 1997, FORD, F360. TIRE SIZE P22576R16, DOT # VD1L406. ORIGINAL TIRE EQUIPMENT. TIRE MILEAGE 21, 685. PLEASE PROVIDE ANY FURTHER INFORMATION."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.

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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
	FIRESTONE	STEEL TEX	1900	

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	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"/> Driver Side Airbag <input type="checkbox"/> Passenger Side 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-Point Belt <input type="checkbox"/> 2-Point Belt			<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Station Wagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Part Name(s) TIRES: TREAD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures	Date(s) of Failure(s) 17-SEP-2000	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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)

PE00020; TIRE TREAD SEPARATION: WHILE DRIVING AT 60 MPH TREAD ON THE OUTSIDE DRIVER'S SIDE REAR TIRE CAME OFF. DRIVER WAS ABLE TO CORRECT THE PROBLEM. VEHICLE WAS A 1997, FORD, F360. TIRE SIZE P22576R16, DOT # VD1L406. ORIGINAL TIRE EQUIPMENT. TIRE MILEAGE 21, 685. PLEASE PROVIDE ANY FURTHER INFORMATION."AK

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 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4206</p> <p>www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 118</p>	
	<p>Signature of Owner: [Redacted] <i>or Institute</i></p> <p>Date: <i>11/2/00</i></p>		<p>Date Received: <i>18-SEP-2000</i></p>	<p>Od_of: _____ rt_dt: _____ od_rt: _____ up_Rr: _____</p>
<p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 639187</p>			<p>Reference No. 870751</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of your name and address to the vehicle manufacturer.</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>			<p>Work Number: [Redacted] Home Number: [Redacted]</p>	

Signature of Owner: [Redacted] *or Institute* Date: *11/2/00*

VEHICLE INFORMATION				
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
<i>1FDLE40F2VHA50221</i>	<i>FIRESTONE</i>	<i>STEEL TEX</i>	<i>1996</i>	<i>22,000</i>
Purchase Date	Dealer's Name	City	State	Zip Code
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	<i>MASTERS TRANSPORTATION</i>	<i>KEARNEY</i>	<i>NE</i>	<i>68848-1570</i>
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
Vehicle Type	Body Style	Engine Size (CID/CC/L) <i>7.3 L</i> <input type="checkbox"/> Turbo Diesel Gas <input type="checkbox"/> Fuel Injection No Cylinders <i>V-8</i>		
<input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input checked="" type="checkbox"/> Other <i>25 Pass Shuttle Bus</i>	<input type="checkbox"/> Sport Ut <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other			

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component	Part Name(s)	Location	Failed Part(s)
<i>02740000</i>	<i>TIRES:TREAD came off tire still inflated. Tare loose fender brackets & damaged fenders.</i>	<input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)
<i>2 of 2 failures</i>	<i>17-SEP-2000</i>	<i>21,685 mi.</i>	<i>65 mph</i>
Failed Part(s) Available?	NHTSA Previously Contacted?		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<i>\$350.00</i>
				Reported to Police
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

PE00020; TIRE TREAD SEPARATION: WHILE DRIVING AT 60 MPH TREAD ON THE OUTSIDE DRIVER'S SIDE REAR TIRE CAME OFF. DRIVER WAS ABLE TO CORRECT THE PROBLEM. VEHICLE WAS A 1997, FORD, F350. TIRE SIZE P22575R16, DOT # VD1L406. ORIGINAL TIRE EQUIPMENT. TIRE MILEAGE 21, 685. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK

CONTINUE ON BACK IF NEEDED

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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	VDILIXD406	MANUFACTURER/TIRE NAME Firestone / Steeltex	SIZE 225/75R16
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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)

This is the second tire that has lost its tread and remained inflated on this bus, the first one happened to come apart coming down a hill on highway 80 (westbound) while travelling 65 mph. No damage occurred and the tire @ this time had 19,500 mi (approximately) and it was the left front. The bus was loaded with passengers. After talking to Firestone dealers and the Manufacturers hotline, they refused to do anything unless someone was killed, injured, or an accident. The tire if purchased from a dealer would have had a treadwear warranty. None of the Firestone representatives spoken to were willing to help or address the problem so we purchased 6 new tires from a different manufacturer.

U.S. G.P.O. 1982 - 625-897 / 80086

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

400 Seventh St., S.W.
Washington, D.C. 20690

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

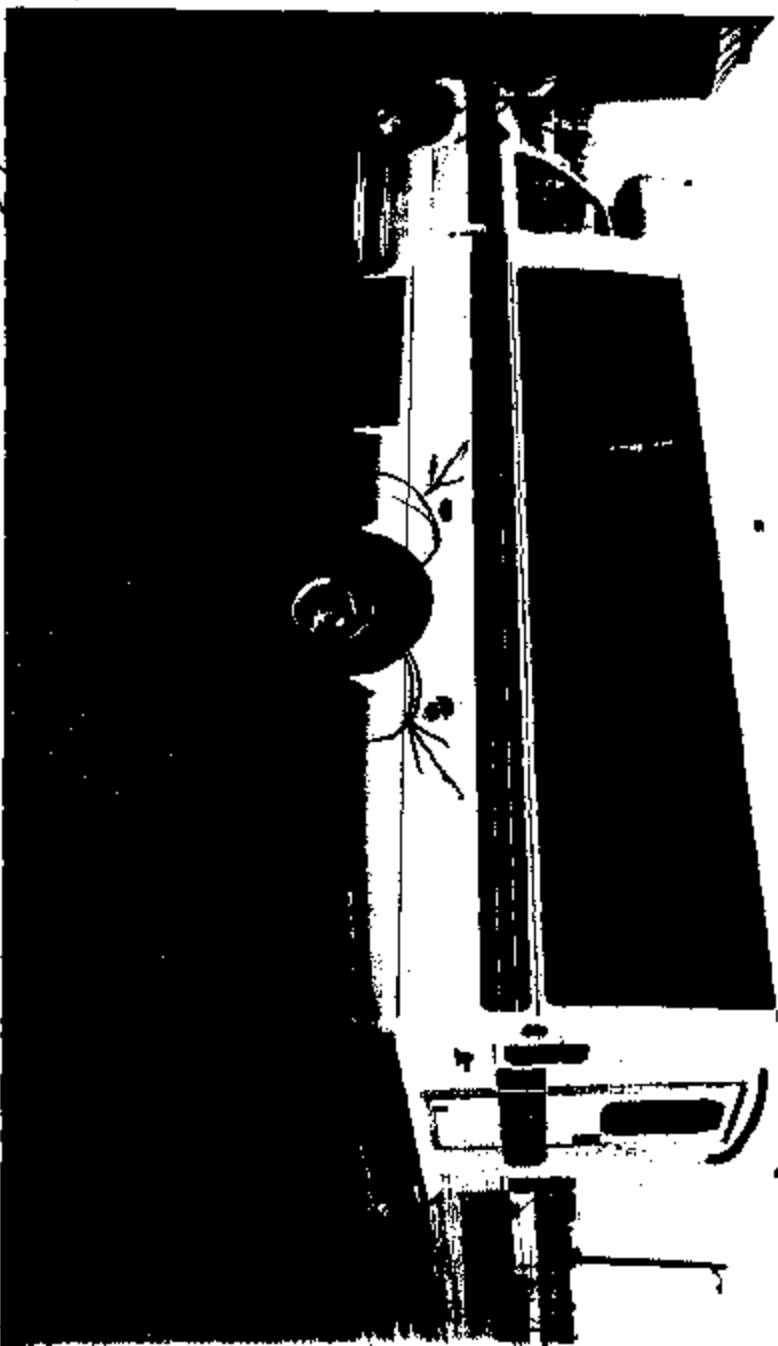


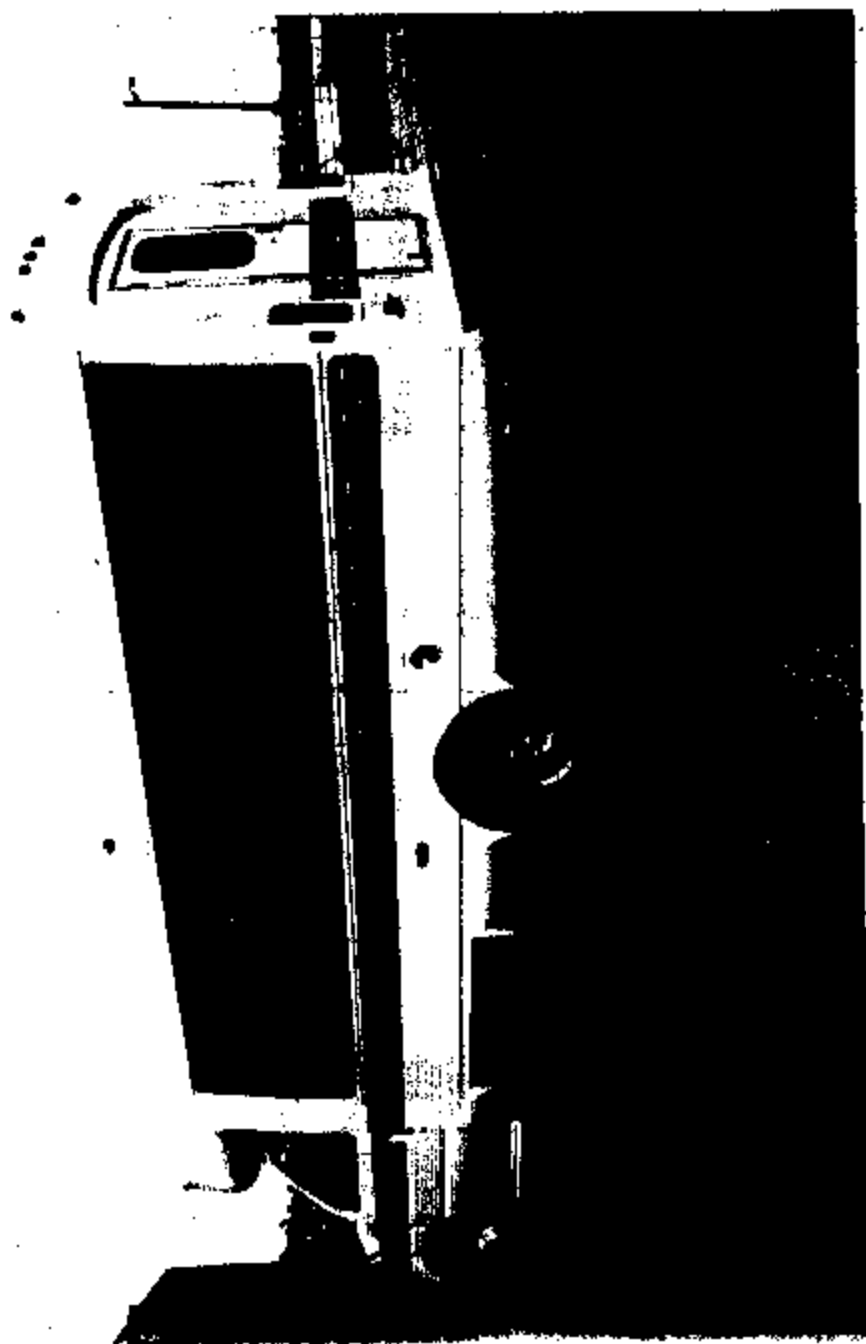
Tire lost its tread


@ 20,450 mi and re-
maind inflated causing
approximately \$750⁰⁰ -
\$1,000⁰⁰ worth of damage
to the fiberglass fender-
wells and bracing.

These areas were damaged.

Traveling @ 65 mph. on the freeway @ night and not an
immediate place to pull over that would be safe for passengers.





DOT Auto Safety Hotline		FOR AGENCY USE ONLY 118	
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) [Redacted] 639187		Date Received 26 SEP 2000 18-SEP-2000 DEFECTS OFFICE INVESTIGATION	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of [Redacted] address to the vehicle manufacturer.		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Signature of Owner [Redacted] Date 11/2/00	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
1EDLE40F2VHA5D221	FIRESTONE	STEEL TEX	1997
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	Current Odometer Reading
	MASTERS TRANSPORTATION	7.3 L	22,000
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City KEARNEY State NE Zip Code 68848-1570	No. Cylinders V-8	<input type="checkbox"/> Turbo <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Drive Train	Vehicle Type	Body Style	
<input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input checked="" type="checkbox"/> Other Shuttle Bus	<input type="checkbox"/> Sport UR <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input checked="" type="checkbox"/> Other 25 Pass.	<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	Part Name(s)	Location	Failed Part(s)
	TIRES-TREAD came off tire still inflated. Tare loose fender brackets & damaged fenders.	<input checked="" type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
2 of 2 Failures	17-SEP-2000 Mileage at Failure(s) 20,950 mi. Vehicle Speed at Failure(s) 60 mph	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0
Estimated Property Damage		Reported to Police	
\$350.00 \$1,000.00		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
PED0020; TIRE TREAD SEPARATION: WHILE DRIVING AT 60 MPH TREAD ON THE OUTSIDE DRIVER'S SIDE REAR TIRE CAME OFF. DRIVER WAS ABLE TO CORRECT THE PROBLEM. VEHICLE WAS A 1997, FORD, F350. TIRE SIZE P22575R16, DOT # VD1L408. ORIGINAL TIRE EQUIPMENT. TIRE MILEAGE 21, 685. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK Driver says between 60-65 mph.			
CONTINUE ON BACK IF NEEDED			
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INFORMATION ON TIRE FAILURE(S) IF APPLICABLE

TIRE IDENTIFICATION NO.*							MANUFACTURER/TIRE NAME		SIZE				
D	O	T	V	D	I	L	X	D	I	1	7	Firestone / Steeltex	225/75R16

* 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)

This is the second tire that has lost its tread and remained inflated on this bus, the first one happened to come apart coming down a hill on highway 80 (westbound) while travelling 65 mph. No damage occurred and the tire @ this time had 19,500 mi (approximately) and it was the left front. The bus was loaded with passengers. After talking to Firestone dealers and the Manufacturers hotline, they refused to do anything unless someone was killed, injured, or in an accident. The tire if purchased from a dealer would have had a treadwear warranty. None of the Firestone representatives spoken to were willing to help or address the problem so we purchased 6 new tires from a different manufacturer.

★ U.S. G.P.O.: 1982 - 625-887 / 10286

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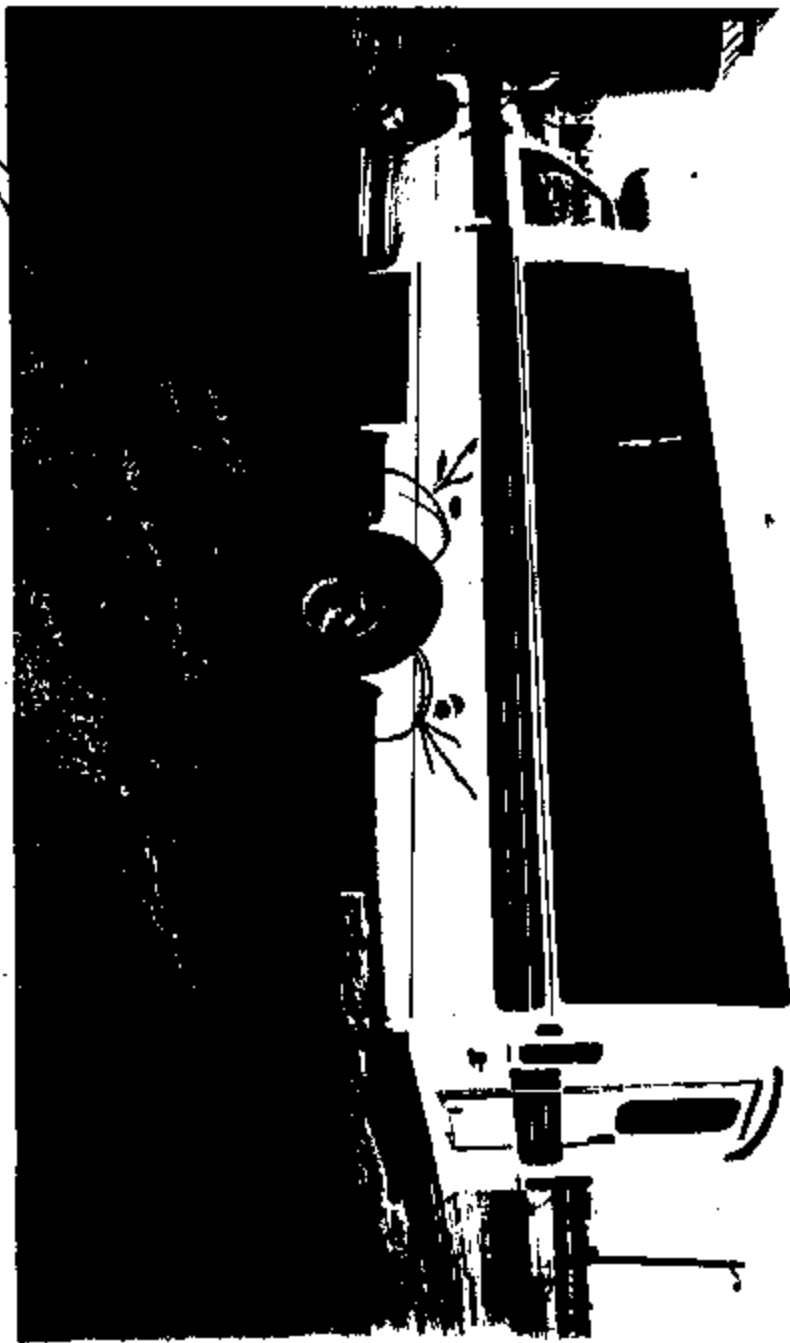



Tire lost its tread

@ 20,450 mi and re-
maind inflated causing
approximately \$350⁰⁰ -
\$1,000⁰⁰ worth of damage
to the fiberglass fender,
wells and bracing.

These areas were damaged:

Traveling @ 65 mi/hr. on the freeway @ night and not an
immediate place to pull over that would be safe for passengers.



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<p>OWNER INFORMATION (Type or Print)</p>		<p>Date Received 07-SEP-2000</p>		<p>Od_or _____ rt_dt _____ od_rt _____ up_itr _____</p>	
<p>Signature of Owner _____</p>		<p>Work Number _____ Home Number _____</p>		<p>Reference No. 869894</p>	
<p>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an answer, we will assume you do not authorize us to do so.</p>		<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO to the vehicle manufacturer.</p>		<p>Date 05 Oct 00</p>	
<p>Vehicle Identification Number (VIN) (Required in order to windshield on driver's side)</p>	<p>Vehicle Make</p>	<p>Vehicle Model</p>	<p>Vehicle Year</p>	<p>Current Odometer Reading</p>	
<p>*FDLE#OFZYH485024</p>	<p>FIRESTONE</p>	<p>STEELTEX</p>	<p>1997</p>	<p>19,750</p>	
<p>Purchase Date 2/1997</p>	<p>Dealer's Name MASTERS TRANSPORTATION</p>		<p>Engine Size (CID/CC/L) 7.5L</p>	<p><input checked="" type="checkbox"/> Turbo <input checked="" type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio</p>	
<p><input checked="" type="checkbox"/> New <input type="checkbox"/> Used</p>	<p>City KEARNEY State NE Zip Code 68848-1570</p>	<p>No. Cylinders 8</p>			
<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>	<p>Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel</p>	<p>Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>Drive Train <input checked="" 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 checked="" type="checkbox"/> Other Shuttle Bus <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 25 Pass</p>
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
<p>Component 02740000</p>	<p>Part Name(s) TIRES:TREAD</p>	<p>Location <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear</p>		<p>Failed Part(s) <input checked="" type="checkbox"/> Original Replacement</p>	
<p>No. of Failures 1</p>	<p>Date(s) of Failure(s) 29-JUL-2000 Mileage at Failure(s) 19,520 Vehicle Speed at Failure(s) _____</p>	<p>Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>NHTSA Previously <input type="checkbox"/> Yes <input checked="" 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><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 0</p>	<p>Number of Fatalities 0</p>	<p>Estimated Property Damag 0</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>PE00020; STEELTEX R45, TIRE SIZE P22575R16, DOT # VDIL1XA406, ORIGINAL EQUIPMENT ON 1997, FORD, E350. WHILE DRIVING DOWNHILL AND LOADED WITH PASSENGERS FRONT END STARTED TO SHAKE VERY HARD DUE TO DRIVER FRONT TIRE TREAD COMING OFF, WHICH could HAVE CAUSED AN Accident. PLEASE PROVIDE FURTHER INFORMATION.*AK <i>Tire Remained inflated.</i></p>					
<p>The Privacy Act of 1974-Public Law 93-502 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>					