

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

117

Date Received

28-SEP-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

871517

 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.) (located at front of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
FILL IN	MACK	CH600	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other ☐ Sport Utl ☐ Truck ☐ Motorcycle	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 13100000 07450000 05150000	Part Name(s) STRUCTURE:FRAME:MEMBERS AND BODY POWER TRAIN:DRIVELINE:DIFFERENTIAL UNIT ENGINE:OTHER PARTS	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) 218 Vehicle Speed at Failure(s) _____	Failed Part(s) Available? Yes No	NHTSA Previously Contacted? 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 Fatalities 0	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CHASSIS HAS FAILED. CROSS MEMBERS HAD BROKEN. REAR END DIFFERENTIALS WERE SHATTERED & BORED THROUGH THE CASINGS & LEAKED OIL. ENGINE HEAD & INTAKE VALVE BROKE & CAME OUT THE EXHAUST. TRANSMISSION GEARS BROKE & COULD NOT BE SHIFTED.*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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DEC 11 PM 5:10
28-SEP-2000

OFFICE

DEFECTS INVESTIGATION

Od. or
d. dt
est. ft
up. ft

Reference No.

871517

OWNER INFORMATION (Type or Print)

641925

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 9/12/1-2000

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) Located at bottom of
windshield on driver's side

Vehicle Make

Vehicle Model

Vehicle Year

Current Odometer Reading

FILL IN 1M1A18Y4VW011949

MACK

CH600

1997

232,500

Purchase Date

5/1/97

Dealer's Name Ballaard MACK

Engine Size

600 CC/L 427

☒ Turbo☒ Diesel☐ Gas☒ Fuel Injection☐ New ☒ Used

City, Worcester State, MA Zip Code

No Cylinders

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Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☒ Manual☐ Yes☒ 3-Point Belt☐ Motorbelt☒ Yes☐ Front☒ Rear☐ Sport UT☒ 2-Door☐ Automatic☒ No☐ Driverside Airbag☐ 2-Point Belt☒ No☐ 4-Wheel☐ Mini-van☐ Truck☐ Stationwagon☐ Other☐ Passenger Airbag☐ Other













