



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

Auto Safety Hotline

## Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 117

Date Received

21-NOV-2000

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

Reference No.

875377

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.) _____<br><small>(located at front of vehicle or on driver's side)</small> | Vehicle Make<br><b>FIRESTONE</b> | Vehicle Model<br><b>STEEL TEX</b> | Vehicle Year<br><b>1900</b> | Current Odometer Reading |
|-----------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------|-----------------------------|--------------------------|

|                                                                       |                                       |                                 |                                                                                                                                              |
|-----------------------------------------------------------------------|---------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Purchase Date                                                         | Dealer's Name _____                   | Engine Size _____<br>(CID/CC/L) | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | City _____ State _____ Zip Code _____ | No. Cylinders _____             |                                                                                                                                              |

|                                                                                            |                                                                                           |                                                                                                                                                                                                                                                      |                                                                                          |                                                                                                                    |                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic | Antilock Brakes<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Restraint System<br><input checked="" type="checkbox"/> 3-Point Belt<br><input type="checkbox"/> Driver Side Airbag<br><input type="checkbox"/> Passenger Side Airbag<br><input type="checkbox"/> Motorized<br><input type="checkbox"/> 2-Point Belt | Cruise Control<br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Drive Train<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | Vehicle Type<br><input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other | Body Style<br><input type="checkbox"/> Sport Vlt<br><input type="checkbox"/> Truck<br><input type="checkbox"/> Motorcycle<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Station Wagon<br><input type="checkbox"/> Pick Up Truck<br><input checked="" type="checkbox"/> Other |
|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

|                              |                                                                                                     |                                                                                                                                                |                                                                                             |
|------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br><b>Q2740000</b> | Part Name(s)<br><b>TIRE: TREAD</b>                                                                  | Location<br><input type="checkbox"/> Left<br><input type="checkbox"/> Front<br><input type="checkbox"/> Right<br><input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No. of Failures              | Date(s) of Failure(s) _____<br>Mileage at Failure(s) <u>40</u><br>Vehicle Speed at Failure(s) _____ | Failed Part(s) Available?<br>  Yes   No                                                                                                        | NHTSA Previously Contacted?<br>  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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------|---------------------------|----------------------|---------------------------|-------------------------------------------------------------------------------------------|

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

WHILE TRAVELING 75MPH TREAD CAME OFF LEFT REAR TIRE. HAD NO WARNING OR VIBRATION OF VEHICLE. WEATHER WAS 95%. RIM DUG INTO CONCRETE. DID NOT LOSE CONTROL OF VEHICLE. FINALLY, PULLED OVER & STOPPED. CHECKED & CHANGED TIRE WITH THE SPARE. TIRE HAD DISINTEGRATED. 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.

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

21 NOV 2000

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Reference No.

876377

Work Num

Home Num

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

☐ YES☐ NO

In the absence of an authorized signature, please print your name and address to the vehicle manufacturer.

Signature of Owner

Date

## VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) **1GKGK26J2WJ724882** Fill IN

Vehicle Make **GMC** Vehicle Model **SUBURBAN** Vehicle Year **1998** Current Odometer Reading **42,000**

Vehicle Make **FIRESTONE** Vehicle Model **STEEL TEX**

Purchase Date **8/98** Dealer's Name **Reliable Chevrolet** Engine Size (CID/CC/L) **454** Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection ☒

☐ New ☒ Used City **Richardson** State **Tx** Zip Code \_\_\_\_\_ No Cylinders **8**

Transmission Type ☐ Manual ☒ Automatic Antilock Brakes ☐ Yes ☒ No

Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag

Cruise Control ☐ Yes ☒ No Drive Train ☐ Front ☐ Rear ☒ 4-Wheel

Vehicle Type ☐ Car ☒ Sport Utility Truck ☐ Van ☐ Minivan ☐ Motorcycle ☐ Other

Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other

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

Component **02740000** Part Name(s) **TIRES: TREAD FIRESTONE Steeltex 245/75 R116** Location ☒ Left ☐ Right ☒ Front ☐ Rear

No of Failures **1** Date(s) of Failure(s) **20-MAY-1999** Mileage at Failure(s) **30,000** 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 \_\_\_\_\_ Number of Fatalities \_\_\_\_\_ Estimated Property Damage \_\_\_\_\_ Reported to Police ☐ Yes ☒ No

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

FRONT  
WHILE TRAVELING 75MPH TREAD CAME OFF LEFT REAR TIRE. HAD NO WARNING OR VIBRATION OF VEHICLE. WEATHER WAS 95%. RIM DUG INTO CONCRETE. DID NOT LOSE CONTROL OF VEHICLE. FINALLY, PULLED OVER & STOPPED. CHECKED & CHANGED TIRE WITH THE SPARE. TIRE HAD DISINTERGRATED. AK

2nd TREAD for entire tire  
was left in Highway (100 yards away)

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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.\*

D O T

MANUFACTURER/TIRE NAME

Firestone

SIZE

LT245/75R16

\* 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)

MADE IN CANADA 23543 UR BMO5326-1  
on 120/116RM/S

U.S. G.P.O. 1992-625-877/8000

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

