



|  DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline | | FOR AGENCY USE ONLY 241 | |
|--|---|--|--|
| OWNER INFORMATION (Type or Print) <div style="background-color: black; width: 400px; height: 40px; display: inline-block;"></div> | | Date Received 27-DEC-2000 | Od_or _____ rt_dt _____ od_rt _____ up_itr _____ |
| | | Reference No. 877104 | |
| | | Work Number _____ Home Number _____ | |
| 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. | | | |
| Signature of Owner _____ | | Date ___/___/___ | |
| VEHICLE INFORMATION | | | |
| Vehicle Ident. No. (VIN.) (Located at bottom of windshield or driver's side) 1GDCD14Z3BS131938 | Vehicle Mak FIRESTONE | Vehicle Mode FR 480 | Vehicle Year 1900 |
| Current Odometer Reading _____ | | | |
| Purchase Date _____ <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | Dealer's Name _____ City _____ State _____ Zip Code _____ | Engine Size (CID/CC) _____ No Cylinders _____ | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio |
| Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic | Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Restraint System <input checked="" type="checkbox"/> 3-Point Bel: <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag | Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | | Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel | Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____ |
| | | Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4 Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input checked="" type="checkbox"/> Truck | |
| FAILED COMPONENT(S)/PART(S) INFORMATION | | | |
| Component 02740000 | Part Name(s) TIRES:TREAD | Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No of Failures _____ | Date(s) of Failure(s) 10-AUG-2000 Mileage at Failure(s) 100000 Vehicle Speed at Failure(s) _____ | Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No | NHTSA Previously <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured _____ | Number of Fatalities _____ |
| | | Estimated Property Damag _____ | Reported to Polic <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) | | | |
| <p>PE 00 020/TREAD SEPARATION: RIGHT REAR TIRE EXPERIENCED A TREAD SEPARATION WHILE TRAVELING. DRIVER WAS THE ONLY ONE IN VEHICLE, AT 55, MPH IN A 1980, CHEVROLET, SILVERADO; AFTERMARKET EQUIPMENT INSTALLED AT 80,126 MILES, TIRE SIZE P235/75R15, DOT# UNAVAILABLE. FIRESTONE NOTIFIED, AND INFORMED CONSUMER THAT TIRE WAS NOT COVERED UNDER RECALL, BUT, WAS WILLING TO EXCHANGE AT A 10% PRORATE. PROBLEM CAUSED VEHICLE TO HIT A GUARDRAIL AND DAMAGED UNDER CARRIAGE AND FRONT BUMPER. FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK</p> | | | |
| <small>CONTINUE ON BACK IF NEEDED</small> | | | |
| <small>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.</small> | | | |

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| OWNER INFORMATION (Type or Print) | | Date Received: 27 DEC 2000 Office: DEFECTS INVESTIGATION Reference No.: 877104 | |
| [Redacted] | | Work Number: [Redacted] Home Number: [Redacted] | |
| Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" 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. | | | |
| Signature of Owner: [Redacted] | | Date: 1/15/01 | |
| VEHICLE INFORMATION | | | |
| Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) | Vehicle Make | Vehicle Model | Vehicle Year |
| 1GDCD14Z3BS131938 | FIRESTONE | FR 480 | 1900 |
| Purchase Date: 1-00 | Dealer's Name: _____ | Engine Size (CID/CC/L): _____ | Current Odometer Reading: 90,768 |
| <input type="checkbox"/> New <input checked="" type="checkbox"/> Used | City: _____ State: _____ Zip Code: _____ | No. Cylinders: _____ | <input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input checked="" 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 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 type="checkbox"/> Other | <input type="checkbox"/> Sport Util <input checked="" 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 checked="" type="checkbox"/> Other | |
| FAILED COMPONENT(S)/PART(S) INFORMATION | | | |
| Component: 02740000 | Part Name(s): TIRES: TREAD | Location: | Failed Part(s): |
| | FIRESTONE 480 | <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front | <input checked="" type="checkbox"/> Right <input type="checkbox"/> Rear <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement |
| No. of Failures: | Date(s) of Failure(s): 10-AUG-2000 | Failed Part(s) Available? | NHTSA Previously Contacted? |
| | Mileage at Failure(s): 100000 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | Vehicle Speed at Failure(s): 55 MPH | | |
| 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | 1 | |
| Estimated Property Damage: \$1800.00 | | Reported to Police: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) | | | |
| <p style="text-align: center;">FRONT</p> PE 00 020/TREAD SEPARATION: RIGHT FRONT TIRE EXPERIENCED A TREAD SEPARATION WHILE TRAVELING, DRIVER WAS THE ONLY ONE IN VEHICLE, AT 55, MPH IN A 1980, CHEVROLET, SILVERADO; AFTERMARKET EQUIPMENT INSTALLED AT 80,126 MILES, TIRE SIZE P235/75R15, DOT# UNAVAILABLE. FIRESTONE NOTIFIED, AND INFORMED CONSUMER THAT TIRE WAS NOT COVERED UNDER RECALL, BUT, WAS WILLING TO EXCHANGE AT A 10% PRORATE. PROBLEM CAUSED VEHICLE TO HIT A GUARDRAIL AND DAMAGED UNDER CARRIAGE AND FRONT BUMPER. FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK | | | |
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