



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 §20

Date Received

29-MAR-2001

Ord. or

rt. dt

pd. rt

rp. ltr

Reference No.

884558

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
JA4LS41RXT063583	MITSUBISHI TRUC	MONTERO SPOR	2000	
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<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 Truck <input checked="" type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03242000	Part Name(s) BRAKES:HYDRAULIC:LINES:HOSE:NON-METALLIC	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 Failure	Date(s) of Failure(s) 15-FEB-2001 17000 Mileage 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 type="checkbox"/> Yes <input checked="" 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER CONTACTED DEALERSHIP IN REGARD TO RECALL NOTICE 01V027000/BRAKE HOSES. DEALERSHIP INFORMED CONSUMER THAT PARTS WERE UNAVAILABLE. HAS TO YET CONTACT CONSUMER TO INFORM HIM THAT DEALERSHIP COULD PERFORM REPAIRS. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

COPIED FROM NHTSA - FEB 2001

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 Transportation
National 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 920

Date Received: APR 20 2001
29-MAR-2001
Reference No. 884558

OWNER INFORMATION (Type or Print)

683510

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 authorized signature, your name and address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 4/16/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Locate at bottom of windshield on driver's side) [Redacted]
Vehicle Make: MITSUBISHI TRU
Vehicle Model: MONTERO SPOR
Vehicle Year: 2000
Current Odometer Reading: [Redacted]

Purchase Date: [Redacted]
Dealer's Name: [Redacted]
City: [Redacted] State: [Redacted] Zip Code: [Redacted]
 New Used
Engine Size (CID/CC): [Redacted] Turbo
Diesel
Gas
Fuel Injection
No. Cylinders: [Redacted]

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 Ut Van Truck Minivan Motorcycle Other
Body Style: 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 03242006
Part Name(s): BRAKES:HYDRAULIC:LINES:HOSE:NON-METALLIC
Location: Left Right Front Rear
Failed Part(s): Original Replacement
No. of Failures: [Redacted]
Date(s) of Failure(s): 15-FEB-2001
Mileage at Failure(s): 17000
Vehicle Speed at Failure(s): [Redacted]
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: [Redacted]
Number of Fatalities: [Redacted]
Estimated Property Damage: [Redacted]
Reported to Police: Yes No

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

CONSUMER CONTACTED DEALERSHIP IN REGARD TO RECALL NOTICE 01V027000/BRAKE HOSES. DEALERSHIP INFORMED CONSUMER THAT PARTS WERE UNAVAILABLE. HAS TO YET CONTACT CONSUMER TO INFORM HIM THAT DEALERSHIP COULD PERFORM REPAIRS. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

(Contacted Soreca Mitsubishi 3 times)

CONTINUE ON BACK IF NEEDED