Form Approved: OMB No. 2127-0042

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 284

Date Received: 03-MAY-2001

Od_or
rt_dt
od_rt
np_ltr

Reference No.: 887356

[redacted]

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.) (Location of number and check digit)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1FUYSDYB6YLF65627	FREIGHTLINER	FREIGHTLINER	2000	

Purchase Dat
☐ New ☒ Used

Dealer's Name_____
City_____ State_____ Zip Code_____

Engine Size (CID/CC/L _____
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
07421000	POWER TRAIN:DRIVESHAFT	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s) / Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
	02-MAY-2001 40	☐ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

WHILE DRIVING DRIVESHAFT CRACKED AND BROKE. MANUFACTURER HAS BEEN NOTIFIED, VEHICLE IS CURRENTLY AT DEALER FOR REPAIRS. *AK

CONTINUED ON REVERSE

Form Approved: O.M.B. No. 2127-0008

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 264

Date Received
01 JUN 15 PM
03-MAY-2001
OFFICE
DEFECTS INVESTIGATION

Od_or
Od_rt
up_ltr

Reference No.
887356

OWNER INFORMATION (Type or Print)

[redacted]

Work Numbe [redacted]
Home Numbe

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 [redacted] Date 05/28/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FUYSDYB6YLF66627	FREIGHTLINER	FREIGHTLINER	2000	47637

Purchase Date: 01-16-01
☒ New ☐ Used

Dealer's Name: STOOPS FREIGHTLINER
City: LIMA State: OH Zip Code: 45802

Engine Size (CID/CC/L) ____ ____
No Cylinders ____
☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☒ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Motorbelt ☐ Drivers de Airbag ☐ 2-Point Belt ☐ Passengersde Airbag	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☒ Other ____	☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other ____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
07421000	POWER TRAIN:DRIVESHAFT	☐ Left ☐ Right ☐ Front ☐ Rear	☒ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	02-MAY-2001 / 40 /	☐ Yes ☐ No	☐ 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	0	☐ Yes ☒ No

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

WHILE DRIVING DRIVESHAFT CRACKED AND BROKE. MANUFACTURER HAS BEEN NOTIFIED, VEHICLE IS CURRENTLY AT DEALER FOR REPAIRS. *AK

CONTINUE ON PAGE IF NEEDED

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	SIZE

* 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)

① When Truck has 6224 Miles 1st Problem attached With this Letter.

② When Truck has 40035 Miles 2nd Problem DRIVELINE APART CRACKED and BROKE. Manufacturer has been Notified - DEALAR Repairs Invoice attached With this Letter.

③ When Truck has 47637 Miles Cost me $1,890.82 For FIX. I have Load Total Weight 42,640 LBS Without any Proble I Deliver that Load to Customer. While Driving With Cruise Control RPM Only Uphill goes up to 2200. I took next day 05/25/01 to Atlanta FTL DEALAR For M1 M2 Service And Check RPM. MYSELF I do not belive Clutch need to be Replaced and Cost me. However PUBLIC SAFETY and my Safety Important to me. Dealar and Manufactures do not Meet their Standerd. I am asking NHTSA Make Sure they Investigate Every DEalar IN America - How to Determine their JOB ... their is a lot OF safety INVolved. it will be helpfulNational: Safety around the Country - Improvement.

☆ U.S. G.P.O.: 1992 – 629-607 / 60088

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

THE FOLLOWING PAGES ARE WITHHELD TO PROTECT UNWARRANTED INVASION OF PERSONAL PRIVACY PURSUANT TO EXEMPTION 6 OF THE FREEDOM OF INFORMATION ACT, 5 U.S.C. 552(b)(6)

(Page 1 through Page 15)

[redacted]

X _____
CUSTOMER SIGNATURE

DL # _____ ST _____

PLEASE PAY
THIS AMOUNT

CUSTOMER COPY

[redacted]

[redacted]

X
SIGNATURE OF PERSON RESPONSIBLE / AGENT FOR PERSON RESPONSIBLE FOR PAYMENT

THIS AMOUNT 0.00

CUSTOMER COPY

PLEASE REMIT TO: P.O. BOX 21717 • BEAUMONT, TX 77720

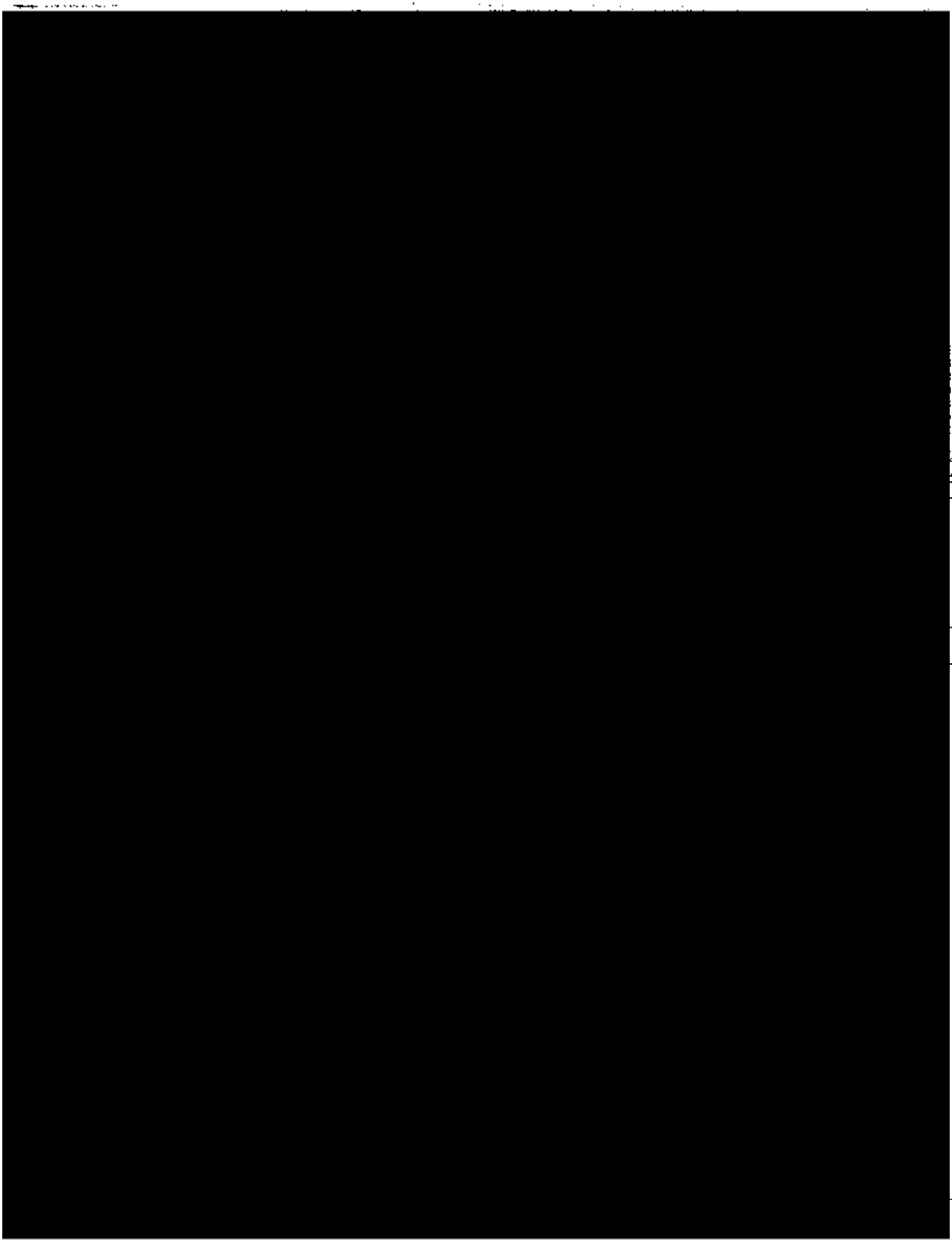
WE APPRECIATE YOUR BUSINESS

Thank You!

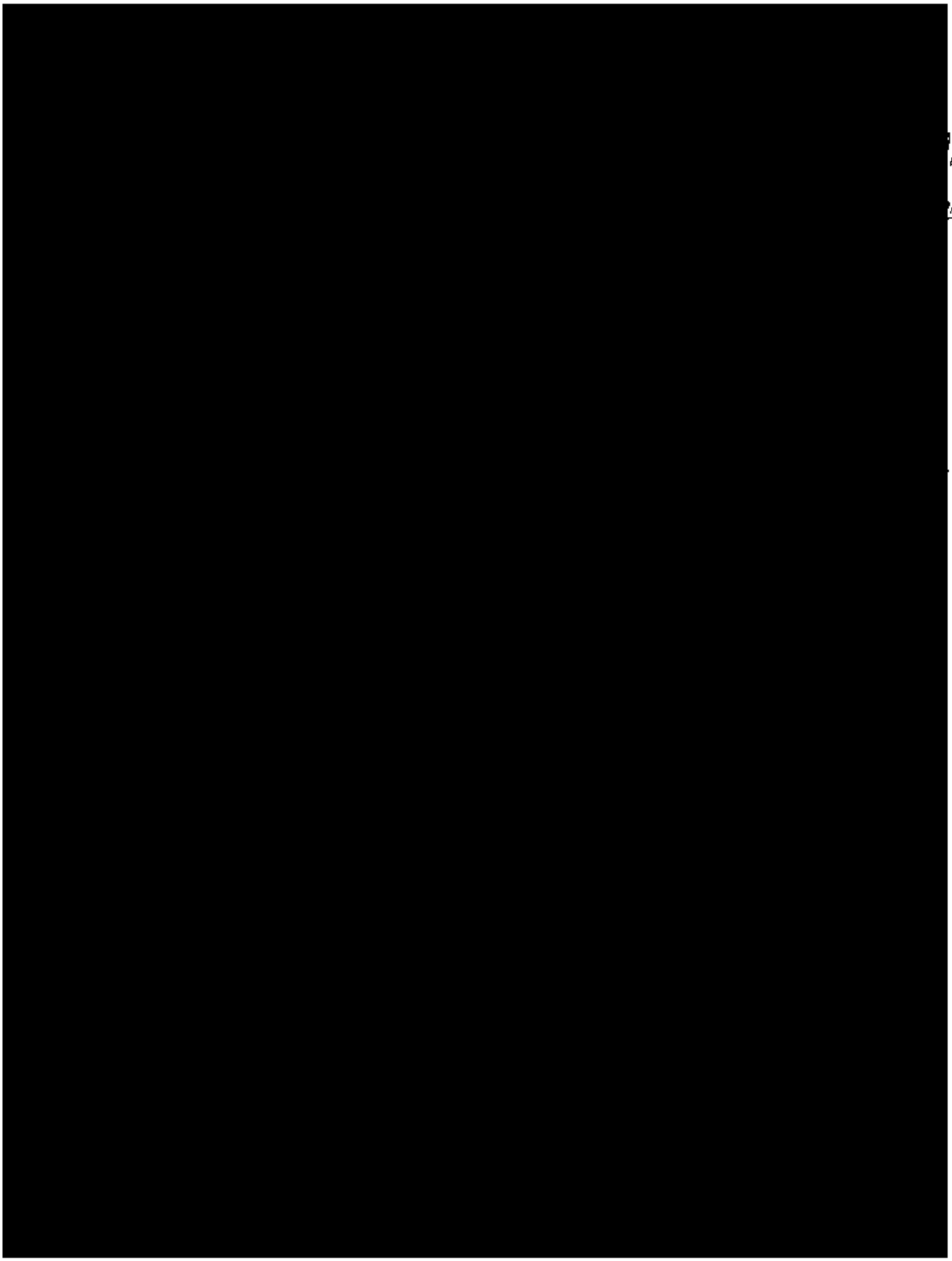
[redacted]

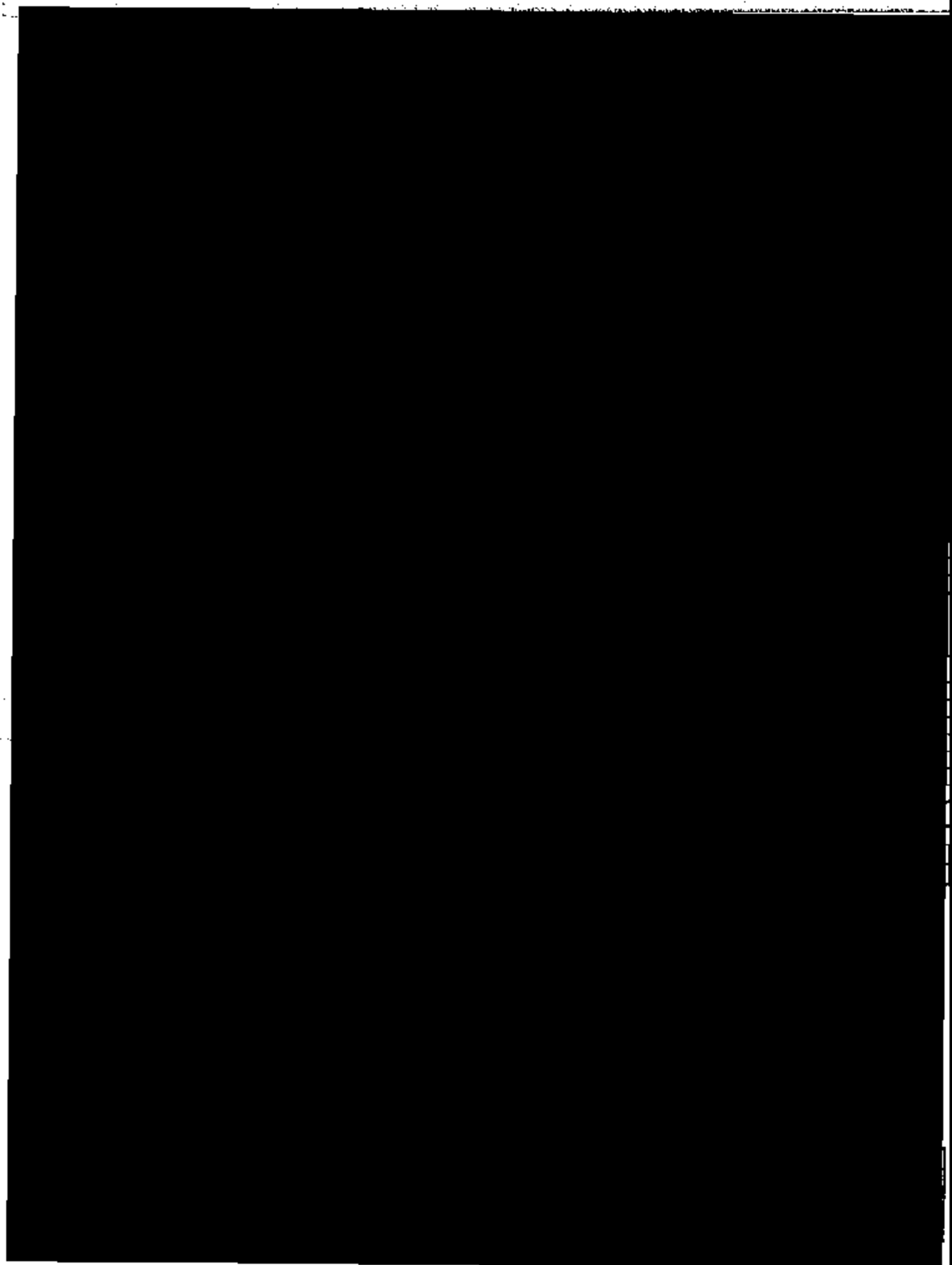
Atlanta Freightliner

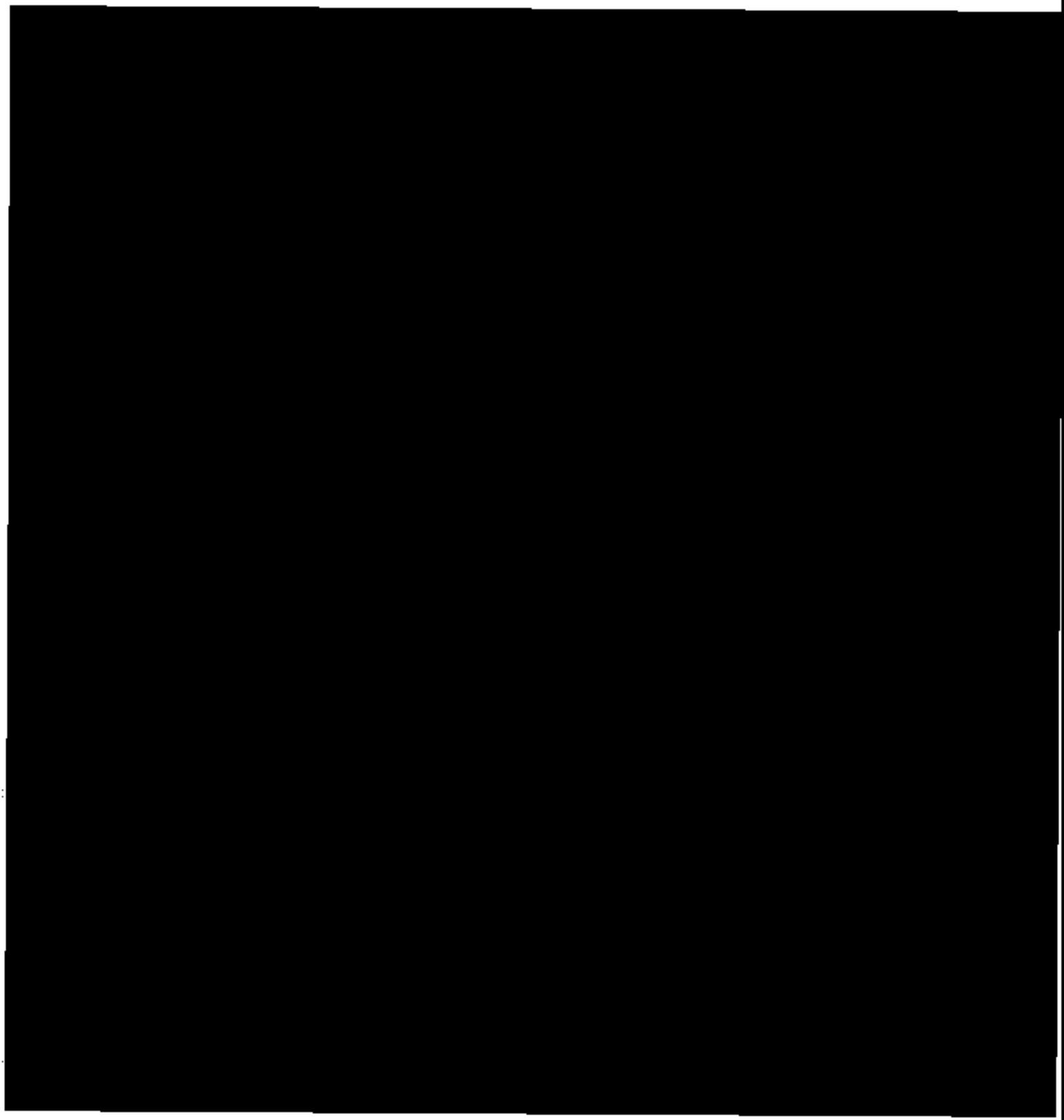
[redacted]



CUSTOMER COPY







[redacted]

[redacted]

[redacted]