



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 558

Date Received

27-AUG-2001

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

895262

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		
JS3TD62V0X4122651	SUZUKI	GRAND VITARA	1999			
Purchase Date <input checked="" type="checkbox"/> New <input type="checkbox"/> Used	Dealer's Name City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" 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 checked="" type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07450000 07421000	Part Name(s) POWER TRAIN:DRIVELINE:DIFFERENTIAL UNIT POWER TRAIN:DRIVESHAFT	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) _____ 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)

DIFFERENTIAL UNIT HAS BEEN REPLACED ON TWO DIFFERENT OCCASIONS. IT HAS BEEN A MONTH SINCE LAST REPLACEMENT, AND A 3RD REPLACEMENT IS NEEDED ALONG WITH A DRIVESHAFT REPLACEMENT. DEALER HAS RECOGNIZED DEFECT, BUT HAS NOT PROVIDED ACCURATE REMEDY.*AK

CONTINUE ON REVERSE

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.

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <h2 style="margin: 0;">Vehicle Owner's Questionnaire (VOQ)</h2> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>	<p>FOR AGENCY USE ONLY 558</p> <p>Date Received <u>27-AUG-2001</u> <i>DEFECTS INVESTIGATION OFFICE</i></p> <p>Odor _____ Rdt _____ Order _____ Up_Ltr _____</p> <p>Patrol No. <u>895262</u></p> <p>Work Number _____ Home Number _____</p>
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OWNER INFORMATION (Type or Print)	
[Redacted]	711120

Do you authorize NHTSA to provide a copy of your report to the manufacturer of your vehicle? YES NO
 In the absence of your signature, provide your name and address to the vehicle manufacturer.
 Signature of Owner [Redacted] Date 8/31/2001

VEHICLE INFORMATION						
Vehicle Ident. No. (VIN) <u>JS3TD62V0X4122651</u>	Vehicle Make <u>SUZUKI</u>	Vehicle Model <u>GRAND VITARA</u>	Vehicle Year <u>1999</u>	Current Odometer Reading <u>29,650</u>		
Purchase Date <u>6/7/99</u>	Dealer's Name <u>Dummy Old Suzuki</u>		Engine Size (CID/CC/L) <u>2.0</u>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City <u>East Pointe</u> State <u>MI</u> Zip Code _____		No. Cylinders <u>6</u>			
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input checked="" type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input checked="" type="checkbox"/> Sport Ut <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>07450000</u> <u>07421000</u>	Part Name(s) <u>POWER TRAIN: DRIVELINE: DIFFERENTIAL UNIT</u> <u>POWER TRAIN: DRIVESHAFT</u>	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures <u>3</u>	Date(s) of Failure(s) <u>7/21/2001 / 8/27/2001 / 8/29/2001</u>	Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Mileage at Failure(s) <u>29540</u>		Vehicle Speed at Failure(s) <u>55-65 mph</u>	

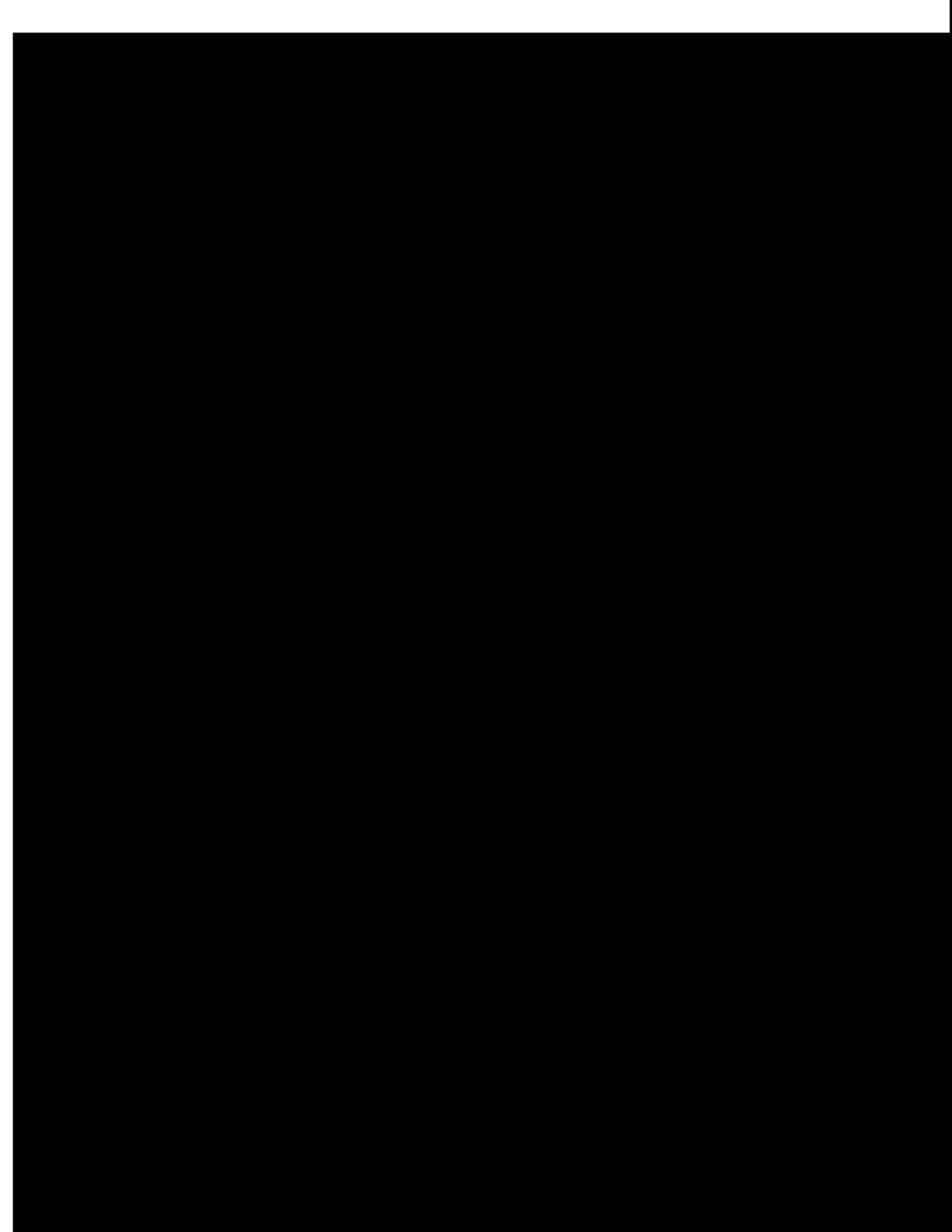
APPLICATION INCIDENT INFORMATION					
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

DIFFERENTIAL UNIT HAS BEEN REPLACED ON TWO DIFFERENT OCCASIONS. IT HAS BEEN A MONTH SINCE LAST REPLACEMENT, AND A 3RD REPLACEMENT IS NEEDED ALONG WITH A DRIVESHAFT REPLACEMENT. DEALER HAS RECOGNIZED DEFECT BUT HAS NOT PROVIDED ACCURATE REMEDY/FAK

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974-Public Law 93-57: 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.



the 1990s, the number of people in the UK who are aged 65 and over has increased from 10.5 million to 13.5 million (10.5 million in 1990, 11.5 million in 1995, 12.5 million in 2000, 13.5 million in 2005).

There are a number of reasons for this increase. One of the main reasons is that people are living longer. The life expectancy at birth in the UK is 77 years for men and 81 years for women. This is an increase from 72 years for men and 76 years for women in 1950. The increase in life expectancy is due to a number of factors, including improvements in diet, lifestyle, and medical care.

Another reason for the increase in the number of people aged 65 and over is that people are having children later in life. This means that there are more people in the 65-74 age group than there were in the 1950s.

The increase in the number of people aged 65 and over has led to a number of challenges for society. One of the main challenges is the need for more care and support for the elderly.

There are a number of ways in which society can meet the needs of the elderly. One way is to provide more care and support in the community. This can be done through a number of different methods, including home care, day care, and residential care.

Another way to meet the needs of the elderly is to provide more financial support. This can be done through a number of different methods, including state pensions, private pensions, and social security.

The increase in the number of people aged 65 and over is a significant challenge for society. It is important that we find ways to meet the needs of the elderly in a sustainable and effective way.

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