



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 125

Date Received

02-OCT-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

897229

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>(Locate at bottom of windshield and door side)</small>                                                                                                                                                                           | Vehicle Make                                                                                  | Vehicle Model                                                                                                                                                                                                                        | Vehicle Year                                                                                 | Current Odometer Reading                                                                                                                     |
| NOT AVAILABLE                                                                                                                                                                                                                                                       | GOODYEAR                                                                                      | WRANGLER                                                                                                                                                                                                                             | 1900                                                                                         |                                                                                                                                              |
| Purchase Date<br><br><input type="checkbox"/> New <input checked="" type="checkbox"/> Used                                                                                                                                                                          | Dealer's Name _____<br>City _____ State _____ Zip Code _____                                  |                                                                                                                                                                                                                                      | Engine Size<br>(CID/CC/L) _____<br>No Cylinders _____                                        | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injection |
| Transmission Type<br><br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic                                                                                                                                                                      | Antilock Brakes<br><br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Restraint System<br><br><input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel<br><input type="checkbox"/> Passengerside Airbag | Cruise Control<br><br><input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No | Drive Train<br><br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel                       |
| Vehicle Type<br><br><input type="checkbox"/> Car <input type="checkbox"/> Sport Util<br><input type="checkbox"/> Van <input type="checkbox"/> Truck<br><input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____ |                                                                                               | Body Style<br><br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input checked="" type="checkbox"/> Other _____           |                                                                                              |                                                                                                                                              |

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

|                       |                                                            |                                                                                                                                          |                                                                                             |
|-----------------------|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|
| Component<br>02740000 | Part Name(s)<br>TIRES:TREAD                                | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part(s)<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No of Failure         | Date(s) of Failure(s) _____<br>Mileage at Failure(s) _____ | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                               | NHTSA Previously<br><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<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Fire<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Police<br><br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------------------------------------------------------------------------|---------------------------------------------------------------------------------|---------------------------|----------------------|--------------------------|-----------------------------------------------------------------------------------------------|

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

WHILE DRIVING 75 MPH TREAD ON RIGHT REAR TIRE COMPLETELY SEPARATED . TIRE SIZE P26570R16, TIRE MILEAGE 56,000, ORIGINAL MANUFACTURED EQUIPMENT ON A TOYOTA, 4 RUNNER, 1999. PLEASE GIVE ANY FURTHER DETAILS.\*AK

COPIES OF THIS FORM ARE:

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.

| DOT Auto Safety Hotline                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | FOR AGENCY USE ONLY 125                                                                                                                                                                                                                   |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
|  <b>U.S. Department of Transportation</b><br><b>National Highway Traffic Safety Administration</b>                                                                                                                                                                                                                                                                                                          |  | <b>Vehicle Owner's Questionnaire (VOQ)</b><br><b>NATIONWIDE 1-888-DASH-2-DOT</b><br><b>1-888-327-4236</b><br><b>www.nhtsa.dot.gov/hotline</b>                                                                                             |  |
| <b>OWNER INFORMATION (Type or Print)</b><br><div style="background-color: black; width: 400px; height: 40px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 400px; height: 40px; margin-bottom: 5px;"></div> <b>718527</b>                                                                                                                                                                                                                                          |  | <b>Date Received</b> <u>01 JAN - 8</u><br><b>DEC 2001</b><br><b>EFFECTIVE</b><br><b>Reference No.</b><br><b>897228</b>                                                                                                                    |  |
| <b>Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?</b><br><b>In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle's manufacturer.</b>                                                                                                                                                                                                                                                                     |  | <b>YES</b> <input checked="" type="checkbox"/> <b>NO</b> <input type="checkbox"/><br><b>Date</b> <u>10/16/01</u>                                                                                                                          |  |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                           |  |
| <b>Vehicle Ident. No. (VIN)</b> <u>JT3GN87APW0080318</u><br><small>(located at bottom of windshield on driver's side)</small>                                                                                                                                                                                                                                                                                                                                                                |  | <b>Vehicle Make</b> <u>GOODYEAR</u><br><b>Vehicle Model</b> <u>WRANGLER</u>                                                                                                                                                               |  |
| <b>Vehicle Year</b> <u>1998</u><br><b>Current Odometer Reading</b> <u>046750.0</u>                                                                                                                                                                                                                                                                                                                                                                                                           |  | <b>Vehicle Year</b> <u>1998</u><br><b>Current Odometer Reading</b> <u>046750.0</u>                                                                                                                                                        |  |
| <b>Purchase Date</b> <u>5-31-98</u><br><input checked="" type="checkbox"/> <b>New</b> <input type="checkbox"/> <b>Used</b>                                                                                                                                                                                                                                                                                                                                                                   |  | <b>Dealer's Name</b> <u>BETTEL TOYOTA</u><br><b>City</b> <u>BRADENTON</u> <b>State</b> <u>FLA.</u> <b>Zip Code</b> <u>34207</u>                                                                                                           |  |
| <b>Transmission Type</b><br><input type="checkbox"/> <b>Manual</b><br><input checked="" type="checkbox"/> <b>Automatic</b>                                                                                                                                                                                                                                                                                                                                                                   |  | <b>Antilock Brakes</b><br><input checked="" type="checkbox"/> <b>Yes</b><br><input type="checkbox"/> <b>No</b>                                                                                                                            |  |
| <b>Restraint System</b><br><input checked="" type="checkbox"/> <b>3-Point Belt</b><br><input checked="" type="checkbox"/> <b>Driverside Airbag</b><br><input checked="" type="checkbox"/> <b>Passengerside Airbag</b>                                                                                                                                                                                                                                                                        |  | <b>Cruise Control</b><br><input checked="" type="checkbox"/> <b>Yes</b><br><input type="checkbox"/> <b>No</b>                                                                                                                             |  |
| <b>Vehicle Type</b><br><input type="checkbox"/> <b>Car</b><br><input type="checkbox"/> <b>Van</b><br><input type="checkbox"/> <b>Minivan</b><br><input type="checkbox"/> <b>Other</b>                                                                                                                                                                                                                                                                                                        |  | <b>Body Style</b><br><input type="checkbox"/> <b>2-Door</b><br><input type="checkbox"/> <b>4-Door</b><br><input type="checkbox"/> <b>Stationwagon</b><br><input type="checkbox"/> <b>Pick Up</b><br><input type="checkbox"/> <b>Truck</b> |  |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                                                           |  |
| <b>Component</b> <u>02740000</u><br><b>Part Name(s)</b> <u>TIRES/TREAD RT/S MUD &amp; SNOW</u><br><u>GOODYEAR P-265-70-R-16</u>                                                                                                                                                                                                                                                                                                                                                              |  | <b>Location</b><br><input type="checkbox"/> <b>Left Front</b><br><input checked="" type="checkbox"/> <b>Right Rear</b>                                                                                                                    |  |
| <b>No. of Failures</b> <u>1</u><br><b>Date(s) of Failure(s)</b> <u>9-30-01</u><br><b>Mileage at Failure(s)</b> <u>46,000</u><br><b>Vehicle Speed at Failure(s)</b> <u>75 MPH</u>                                                                                                                                                                                                                                                                                                             |  | <b>Failed Part(s)</b> <u>RIGHT REAR</u><br><input checked="" type="checkbox"/> <b>Original</b><br><input type="checkbox"/> <b>Replacement</b>                                                                                             |  |
| <b>APPLICATION INCIDENT INFORMATION</b><br>(Please describe in detail the incident(s), failure(s), crash(es), and injury, if any, on the back of this form)                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                           |  |
| <b>Crash</b><br><input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>                                                                                                                                                                                                                                                                                                                                                                                            |  | <b>Fire</b><br><input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>                                                                                                                                          |  |
| <b>Number of Persons Injured</b> <u>NONE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>Number of Fatalities</b> <u>NONE</u>                                                                                                                                                                                                   |  |
| <b>Estimated Property Damage</b> <u>NONE</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | <b>Reported to Police</b><br><input type="checkbox"/> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b>                                                                                                                            |  |
| <b>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</b>                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                           |  |
| <p>WHILE DRIVING 75 MPH TREAD ON RIGHT REAR TIRE COMPLETELY SEPARATED. TIRE SIZE P265/70R16, TIRE MILEAGE <u>46,000</u> ORIGINAL MANUFACTURED EQUIPMENT ON A TOYOTA, 4 RUNNER, 1999. PLEASE GIVE ANY FURTHER DETAILS. *AK</p> <p><u>46,000 IS CORRECT, I WAS WRONG IN SAYING 50,000 MI.</u></p> <p><u>JT3GN87APW0080318 - I.D. (SERIAL #)</u></p>                                                                                                                                            |  |                                                                                                                                                                                                                                           |  |
| 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 Administration and 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. |  |                                                                                                                                                                                                                                           |  |

INFORMATION ON TIRE FAILURE(S) IF APPLICABLE:

|   |   |   |   |   |   |   |   |   |   |   |  |  |
|---|---|---|---|---|---|---|---|---|---|---|--|--|
| D | O | T | M | K | 7 | 2 | 8 | 0 | 0 | R |  |  |
|---|---|---|---|---|---|---|---|---|---|---|--|--|

MANUFACTURER/TIRE NAME  
GOOD YEAR WRANGLER RT/S

P26570R16

NARRATIVE DESCRIPTION (CONTINUED)

LET US KNOW WHAT TO DO

THANK-YOU

CONSUMER

☆ U.S. G.P.O.: 1962-622-887 / 55234

16 OCT 2001

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

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U.S. Department of Transportation  
National Highway Traffic Safety Administration  
**Information Management Staff NSA-10.01**  
400 7th Street, SW  
Washington, DC 20590

**20899-1572** 