



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 758

Date Received

19-NOV-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

899250

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) (Locate at bottom of windshield or driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2NKMHY6X71M881280		KENWORTH	T300	2001	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02100000	Part Name(s) SUSPENSION INDEPENDENT FRONT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 01-APR-2001	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) 8000		
	Vehicle Speed at Failure(s)		

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	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FRONT END SHIMMIES AT 45 MPH. VEHICLE HAS BEEN TAKEN TO DEALER 10 TIMES. DEALER HAS NOT BEEN ABLE TO CORRECT THE PROBLEM. PLEASE PROVIDE FURTHER DETAILS.*AK

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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 1-888-327-4238 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 758 Date Received <u>JAN 25 AM 7:12</u> <u>24-NOV-2001</u> Od_or rt_dt od_rt up_itr Reference No. <u>899250</u> Work Num <u>[REDACTED]</u> Home Num <u>[REDACTED]</u>	
OWNER INFORMATION (Type or Print) <u>[REDACTED]</u> 726683				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) (Located at bottom of windshield on driver's side) 2NKMHY6X71M881280		Vehicle Make KENWORTH		Vehicle Model T300	
Vehicle Year 2001		Current Odometer Reading			
Purchase Date ☒ New ☐ Used		Dealer's Name <u>KENWORTH OF INDIANAPOLIS</u> <u>2929 SOUTH HOIT ROAD</u> City <u>INDIANAPOLIS</u> State <u>IN</u> Zip Code <u>46135</u>		Engine Size (CID/CC/L) _____ No. Cylinders _____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
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 ☐ Van ☐ Minivan ☐ Other	
Body Style ☐ Sport Ult ☐ Truck ☐ Motorcycle		☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 02100000		Part Name(s) SUSPENSION:INDEPENDENT FRONT		Location ☐ Left ☐ Right ☐ Front ☐ Rear	
Failed Part(s) ☐ Original ☐ Replacement		No. of Failures Date(s) of Failure(s) <u>01-APR-2001</u> Mileage at Failure(s) <u>8000</u> Vehicle Speed at Failure(s) <u>45-52</u>			
Failed Part(s) ☐ Yes ☐ No		NHTSA Previously ☐ 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	
Number of Fatalities		Estimated Property Damage		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) FRONT END SHIMMIES AT 45 MPH. VEHICLE HAS BEEN TAKEN TO DEALER 10 TIMES. DEALER HAS NOT BEEN ABLE TO CORRECT THE PROBLEM. PLEASE PROVIDE FURTHER DETAILS.*AK <i>DEALER WILL NOT EVEN MAKE AN ATTEMPT TO CORRECT THE PROBLEM. DEALER KEEPS TELLING US TO BE PATIENT & THEY WILL TAKE CARE OF THE PROBLEM. THEY WILL NOT RETURN MY CALLS AND RASHLY IGNORE OUR PROBLEM.</i>					
CONTINUE ON BACK IF NEEDED					
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.					