



U.S. Department of Transportation  
National Highway Traffic Safety Administration

Auto Safety Hotline

# Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue or black ink pen only.

CORRECT MARKING

## FOR AGENCY USE ONLY

Date Received <b>1/17/02</b>	DAI# _____
Reference No.	IC-# _____
	CR-# _____



VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield or driver's side)	VEHICLE MAKE	VEHICLE MODEL	MANUFACTURE DATE	MODEL YEAR
<b>4U262FB68WCA29171</b>	<b>Holiday Rambler</b>	<b>INDEAVOR</b>	<b>4/1998</b>	

VEHICLE MANUFACTURER						
<input type="radio"/> BMW	<input type="radio"/> Ford	<input type="radio"/> Honda	<input type="radio"/> Nissan	<input type="radio"/> Subaru	<input type="radio"/> Volvo	<input type="radio"/> Other <b>Freightliner</b>
<input type="radio"/> Daimler/Chrysler	<input type="radio"/> General Motors	<input type="radio"/> Hyundai	<input type="radio"/> Saab	<input type="radio"/> Toyota	<input type="radio"/> VW	<b>Chrysler</b>

PURCHASE DATE	<b>1-18-99</b>	DEALER'S NAME	<b>Paul Paul's Camper City</b>	CITY	<b>Foley</b>	STATE	<b>ALA</b>	ZIP CODE	
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ENGINE SIZE	<b>5.9L</b>	FUEL SYSTEM	<input checked="" type="checkbox"/> Turbo	FUEL TYPE	<input checked="" type="checkbox"/> Diesel	TRANSMISSION TYPE	<input checked="" type="checkbox"/> Manual	ANTILOCK BRAKES	<input checked="" type="checkbox"/> No	RESTRAINT SYSTEM	<input type="checkbox"/> Driverside Airbag	CRUISE CONTROL	<input checked="" type="checkbox"/> Yes
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DRIVETRAIN	<input checked="" type="checkbox"/> Rear	VEHICLE TYPE	<input type="checkbox"/> Car	<input type="checkbox"/> Minivan	<input type="checkbox"/> Truck	<input type="checkbox"/> Other <b>Motor Home</b>	DOORS	<input checked="" type="checkbox"/> 2-Door	<input type="checkbox"/> 4-Door	BODY STYLE	<b>Motor Home</b>
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### FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (Include all number and letters).	
<input type="checkbox"/> Child Seat <input type="checkbox"/> Electrical Light & Alarms <input type="checkbox"/> Engine & Cooling System <input type="checkbox"/> Equipment <input type="checkbox"/> Fuel System, Exhaust <input type="checkbox"/> Heater, Defrost, Ventilation <input type="checkbox"/> Interior <input type="checkbox"/> Parking Brake <input type="checkbox"/> Power Train <input type="checkbox"/> Service Brakes <input type="checkbox"/> Steering <input type="checkbox"/> Structure <input type="checkbox"/> Suspension <input type="checkbox"/> Visual Systems <input checked="" type="checkbox"/> Other <b>Tires</b>	<b>4</b>	<b>INCIDENT DATE</b> <b>12/1/00</b> <b>10/22/01</b> <b>9/15/01</b> <b>10/25/01</b>	<b>TIRE NAME</b> <b>MICHELIN</b>
		<b>MILEAGE AT INCIDENT</b> <b>8000</b> <b>15352</b> <b>15200</b> <b>15562</b>	<b>COMPLETE TIRE SIZE</b> <b>235/80R22.5 2RU</b>
		<b>VEHICLE SPEED AT INCIDENT</b> <b>60 MPH</b> <b>45 MPH</b> <b>60 MPH</b> <b>60 MPH</b>	<b>TIRE BRAND</b> <input type="checkbox"/> BF Goodrich <input type="checkbox"/> Cooper <input type="checkbox"/> Firestone <input type="checkbox"/> Goodyear <input type="checkbox"/> Kelly Springfield <input checked="" type="checkbox"/> Michelin <input type="checkbox"/> Yokohama <input type="checkbox"/> Other
		<b>FAILED PART(S)</b> <input type="checkbox"/> Engine <input type="checkbox"/> Replacement <b>See back of form</b>	<b>Label was P245-75R 22.5 G 159</b>

HANDICAPPED ADAPTIVE	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FAILED PART(S) AVAILABLE?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NHTSA PREVIOUSLY CONTACTED?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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### APPLICABLE INCIDENT INFORMATION

Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.	CHASH	NUMBER OF PERSONS INJURED	CAUSE OF INCIDENT	RESULT OF INCIDENT
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>0</b>	<input type="checkbox"/> Wear/Corroded/Rust <input type="checkbox"/> Weak/Poor Fit/Loose <input type="checkbox"/> Cut/Torn <input type="checkbox"/> Disconnect/Fall Off <input type="checkbox"/> Erratic/Poor Performance <input type="checkbox"/> Excessive Effort	<input type="checkbox"/> Explosion/Fire <input type="checkbox"/> Loss of Control <input type="checkbox"/> Poor Visibility <input type="checkbox"/> Inadvertent Start <input type="checkbox"/> Rollover <input type="checkbox"/> Stalls <input type="checkbox"/> Sudden Acceleration
	FIRE	NUMBER OF FATALITIES	<input type="checkbox"/> Noisy <input type="checkbox"/> Leaks <input type="checkbox"/> Short <input type="checkbox"/> Locks/Sticks/Grabs <input type="checkbox"/> Stability/Vibration <input type="checkbox"/> Broken	
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>2</b>		

PLEASE DO NOT WRITE IN THIS AREA



05361

Additional accidents if applicable.

1) 12/4/00 60 MPH 3000 miles  
Cost \$ 292.13

2) 9/15/01 60 MPH 1500 miles  
Cost \$ 528.09

3) 10/20/01 45 MPH 1500 miles  
Cost N/A

(4) 10/25/01 60 MPH 1550 miles  
Cost N/A

on the CD Blow out 15  
Blow the fender wild out  
Best Pendants on cost

1 Purchase a new tire  
from 10/14/00, & put on  
Ground to sand one of the  
Original as a spare

Cost \$ 293.55

Tot cost 8 hour Pa Lot  
for tires \$ 1113.87

Continue on additional page if necessary.

Describe any additional incidents. Include date and mileage!

The Privacy Act of 1974, Public Law 93-502. This information is requested primarily to identify vehicles 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 an administrative enforcement or litigation against a manufacturer, your response, if a judicial authority thereon, may be used in support of the agency's action.

Printed by NCS EPM-20000-1484201 NHTSA Printed in U.S.A.  
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NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



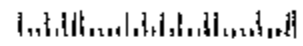
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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NSA-10.01  
400 7th Street, SW  
Washington, DC 20590

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



Complete and return or place in your car manual for future use



**VEHICLE  
OWNER'S  
QUESTIONNAIRE  
(VQQ)**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH 2 DOT**

and dial toll free at

**1-888-DASH-2-DOT**

**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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