

ATTACHMENT D5

INTERVIEW FORM

TIRE PRESSURE

(2/26/10 Draft)

Form Approved O.M.B. No. 2127-0626
Expiration Date: XXXX

National Automotive Sampling System
Tire Pressure Monitoring System – Special Study



United States Department of Transportation
National Highway Traffic Safety Administration

1. Primary Sampling Unit Number ____
2. Site Number ____
3. Observation Number ____
4. Date of Observation ____/____/2010
5. Interview in: English Spanish
6. Observations: (Interviewed Refused <2004)
 - 1) Body Type: Auto SUV Van PU
 - 2) Sex: Male Female
 - 3) Age: Young Adult Adult Senior
 - 4) Race: Indian Asian Black
 Hispanic Hawaiian White

[Questions about Vehicle]

7. Who is the owner of this vehicle? (Check One)
 - 1) Joint with other
 - 2) Self
 - 3) Partner/spouse/significant other
 - 4) Parent or Other family member
 - 5) Friend or neighbor
 - 6) Lease
 - 7) Short-term rental
 - 8) Car-share
 - 9) Company/work
 - 10) Other
8. How long have you had this vehicle?
Years: _____ Months: _____ Days: _____
(< 1 month)
9. Was this vehicle new when you obtained it?
 No Yes
10. Have any of the original tires on this vehicle been replaced? If yes, which ones and when?

Tire	Years	Months
1) <input type="checkbox"/> No, none		
2) <input type="checkbox"/> Yes, LF		
3) <input type="checkbox"/> Yes, LR		
4) <input type="checkbox"/> Yes, RR		
5) <input type="checkbox"/> Yes, RF		
6) <input type="checkbox"/> Yes, Spare		
7) <input type="checkbox"/> Yes, Don't know		
8) <input type="checkbox"/> Yes, Other (specify)		

[Questions about tire pressure]

11. Drivers keep their tires at their proper pressure for different reasons. List the reasons that are important to you for keeping tires properly inflated. (Do not read categories, but check all that apply)

- 1) Improved safety
- 2) Improved vehicle performance/handling
- 3) Improved fuel economy
- 4) Longer lasting tires
- 5) Other (specify) _____

12. Where would you, or do you, primarily turn for information on what pressure to set your tires for this vehicle? (Check one)

- 1) Intuition/prior knowledge
- 2) Owner's manual
- 3) Vehicle placard
- 4) Tire sidewall labeling
- 5) A service technician
- 6) OnStar or other automatic system
- 7) Relative or friend
- 8) Don't know
- 9) Other (specify) _____

13. Whose responsibility is it to check the tire pressure? (Check one)

- 1) Self
- 2) Relative or friend
- 3) Service station/dealer
- 4) TPMS
- 5) OnStar or other automatic system
- 6) Owner (other than self, relative or friend)
- 7) No one
- 8) Other (specify) _____

14. Under what circumstances do you have the tire pressure on this vehicle checked, either by yourself or someone else? (Check all that apply)

- 1) Never (Skip to Q 15—Add Air)C
- 2) Before a long trip
- 3) When tires look or feel low
- 4) When tire pressure warning light comes on
- 5) When car is serviced
- 6) When the load being carried is changed
- 7) Tire pressure is checked on a regular basis
- 8) By OnStar or other automatic system
- 9) Don't know
- 10) Other (specify) _____

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- 15.** When was the last time that you, or someone else, checked the tire pressure on this vehicle?
- 1) Never
 - 2) Within the past month
 - 3) 1-2 months ago
 - 4) 3-4 months ago
 - 5) More than 4 months ago
 - 6) Continuously (as with TPMS or OnStar)
 - 7) Don't know
- 16.** When was the last time that you, or someone else, put air in the tires on this vehicle?
- 1) Never (Skip to Q17-Have TPMS)
 - 2) Within the past month
 - 3) 1-2 months ago
 - 4) 3-4 months ago
 - 5) More than 4 months ago
 - 6) Don't know
- 17.** By what method was air added the last time that you, or someone else, put air in the tires on this vehicle?
- 1) Used pump owned by self or other person
 - 2) Gas station air pump by self or other
 - 3) Asked a relative/friend to do it
 - 4) When vehicle was serviced
 - 5) Has not needed to put air into a tire
 - 6) Other
- 18.** Does this vehicle have a Tire Pressure Monitoring System - also known as a TPMS system?
- 1) No
 - 2) Yes
 - 3) Don't know

Now I need to ask you some basic information about yourself. [Demographic Information]

- 19.** What is your home zip code? _____
- 20.** How old are you? _____ (Code to nearest yr)
- 21.** What is the highest grade or year of school you completed?
- 1) Less than high school
 - 2) High school / GED
 - 3) Some college
 - 4) College graduate
 - 5) Higher degree
 - 6) (Vol) Refused

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(Continue only for vehicles that have TPMS-Q#18)

- 22.** Would you have time now to answer a few additional questions?
- 1) No (Go to Q 23-Do Later)
 - 2) Yes (Go to Supplemental Form)
- 23.** Would you be willing to answer a few additional questions at a later date, using:
- 1) On-line
 - 2) Mail-back form
 - 3) Phone call back
 - 4) Refuse (End)
- 24.** What is your name? _____
- 25.** At what phone number(s) would you like to be called? _____

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26. What are good times to call? _____

27. SUP ID: _____

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