



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received

Repository ☐

2003 MAY 12 PM 12:31
14-FEB-2003

Reference No.
10007498

OWNER INFORMATION (Type or Print)

Name

Address

City KINGSTON

State IL

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an authorized signature, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner: [Signature] Date: 5/22/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at (bottom of windshield on driver's side)

PLEASE FILL IN

2003HD46F2VHG6534

Make

DODGE

Model

INTREPID

Model Year

1997

Date Purchased

7-5-01

Dealer's Name and Telephone Number

Brian Bemis auto world (915) 945-9105

Engine: 3.5L

No. Cylinders

6

Fuel Type:

GAS

Original Owner

☐

Dealer's City

Stamora

State

IL

Zip Code

60111

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

070000 FUEL SYSTEM, GASOLINE

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
05-FEB-2003

Failure Mileage

100,000

Failure Speed

0

The fuel line slipping failed on pass. side of fuel rail. Chrysler said there was recall done on that side

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM15ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

THE VEHICLE LEAKED GASOLINE. *JB

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

The driver or first rail was looking on passenger side. Chrysler said they have a recall on that side one year before this. Also the car had been wrecked when we bought it. No one at dealership told us this. My body man did some repairs to front end and said that car was still wrecked from that accident. We called the dealership and informed them what happen. They said that they wouldn't take no responsibility in this matter. So I still have a wrecked car that someone else wrecked.

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Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

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

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S
QUESTIONNAIRE**

DOT AUTO SAFETY HOTLINE

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COMPLETE THIS FORM

OR

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and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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