



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 1368

Date Received: **2003 MAR 28 AM 11: 08** Repository

Reference No.
10010072

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: **LANSDOWNE** State: **VA** Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] 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, you must provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: **3/28/03**

VEHICLE INFORMATION

Vehicle Identification Number: **1B4HS28Z2YF296172** Make: **DODGE** Model: **DURANGO** Model Year: **2000**

Date Purchased: **6/2000** Dealer's Name and Telephone Number: **Heardrick Dodge** Engine: **XUT 5.9** Fuel Type: **Gas**
Original Owner: Dealer's City: **Cary** State: **NC** Zip Code: **27511** No. of Cylinders: **8**

Transmission Type: **AUTOMATIC** Antilock Brakes Powertrain: **103000 POWER TRAIN: AUTOMATIC TRANSMISSION**
 Cruise Control Vehicle Component Code: **103000 POWER TRAIN: AUTOMATIC TRANSMISSION**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): **03-MAR-2003** Failure Mileage: **48K** Failure Speed: **45 MPH**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: [Redacted] Tire Model (Name or Number): [Redacted] Tire Size (Example P215/65R15): [Redacted]
DOT No. (Example: DOTM19ABC0361) Original Equipment Prior Repair Failure Location:
Tire Component Code: [Redacted] Tire Failure Type:

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [Redacted] Date Manufactured: [Redacted] Model No./Name: [Redacted]
Seat Type: [Redacted] Installation System: [Redacted]
Child Seat Component Code: [Redacted] Failed Part: [Redacted]

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: [Redacted] Number of Deaths: [Redacted] 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 TRANSMISSION FAILED, WHICH CAUSED THE VEHICLE NOT ACCELERATE.*JB **Transmission fail to engage.**
Vehicle pushed off the Highway then towed to the dealer
Dealer had to rebuild the transmission, I had to pay \$20200

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)

We were lucky that there was
No crash or accidents were involved. No cars were
on the highway

ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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



**VEHICLE
OWNER'S**

QUESTIONNAIRE

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TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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