



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 100147

Date Received

Repository ☐

07-MAY-2003 JUN -9

Reference No.
10019320

OWNER INFORMATION (Type or Print)

Name

Address

City JOHNSTOWN

State PA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Same

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of a signature, your name or address to the vehicle manufacturer.
Signature of Owner Date 5/27/03

VEHICLE INFORMATION

Make
EDGE

Model
INTREPID

Model Year
1994

Date Purchased
JAN-03

Dealer's Name and Telephone Number

Engine: 3.5
No. Cylinders 6

Fuel Type:
Unleaded

Original Owner
☐

Dealer's City

State PA

Zip Code

Transmission Type

Auto

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

010000 STEERING

Multiple Failure: Stuck in Second Paid to have

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
15-MAR-2003

Failure Mileage

Failure Speed

- 03 I understand
very common for Dodge
\$2,000!

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: DOTM15ABC135)

☐ 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(es).)

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(es).

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).

WHILE DRIVING THE STEERING BECAME LOOSE AND CAUSED THE STEERING WHEEL TO JUMP AROUND. THIS MADE IT DIFFICULT FOR
THE DRIVER TO STEER THE VEHICLE. *NLM

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)

IS NOW Jerky When Driving - sways. Would like Fixed
before it causes accident. Am take a \$1000 part
will fix, plus 4 hour labor @ 50 per hour.
\$220.00

US Department
of Transportation

National Highway
Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$300



ATTACH ADDITIONAL SHEETS IF NECESSARY

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**

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DASH2DOT

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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NHTSA Form 101, Rev. 10/97