

 AUTO SAFETY HOTLINE VEHICLE OWNER'S QUESTIONNAIRE <small>U.S. Department of Transportation National Highway Traffic Safety Administration</small> <small>NATIONWIDE 1-800-424-9393 DC METRO AREA 202-366-0123</small>		FOR AGENCY USE ONLY	
		DATE RECEIVED 2003 JUL -3 AM 10:30	od. or _____ rt. ct. _____ od. rt. _____ up. lr. _____
OWNER INFORMATION (TYPE OR PRINT)		REFERENCE NO. 10226542	
NAME and ADDRESS [REDACTED] LAKEPORT CA [REDACTED]		DAY TIME TELEPHONE NO. (AREA CODE) [REDACTED]	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.			
SIGNATURE OF OWNER [REDACTED]		DATE 6-26-03	
VEHICLE INFORMATION			
VEHICLE IDENTIFICATION NO.* 1B7GL23X15S232396		VEHICLE MAKE DODGE	VEHICLE MODEL DAKOTA
*LOCATED AT BOTTOM OF WINDSHIELD ON DRIVER'S SIDE		MODEL YEAR 1995	
CURRENT ODOMETER READING 184254	DATE PURCHASED 2-29-02 <input type="checkbox"/> NEW <input checked="" type="checkbox"/> USED	DEALER'S NAME, CITY & STATE Airport Auto Brokers LAKEPORT CA	ENGINE SIZE (CID/CGL) _____ NO. CYLINDERS 6 <input type="checkbox"/> TURBO <input type="checkbox"/> DIESEL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> FUEL INJECTN
TRANSMISSION TYPE <input type="checkbox"/> MANUAL <input checked="" type="checkbox"/> AUTOMATIC	ANTILOCK BRAKES <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	RESTRAINT SYSTEM <input checked="" type="checkbox"/> DRIVERSIDE AIRBAG <input type="checkbox"/> MOTORBELT <input type="checkbox"/> PASSENGERSIDE AIRBAG <input checked="" type="checkbox"/> 3-POINT BELT <input type="checkbox"/> 2-POINT BELT	CRUISE CONTROL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		DRIVETRAIN <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> 4-WHEEL	BODY STYLE STAWAG _____ 4 DR _____ 2 DR _____ HATCH BK _____ VAN _____ PK UP TRK _____ OTHER _____
FAILED COMPONENT(S)/PART(S) INFORMATION (REPORT TIRE INFORMATION ON BACK)			
COMPONENT FRAME	PART NAME(S) FRAME CRACKED	LOCATION <input type="checkbox"/> LEFT FRONT <input checked="" type="checkbox"/> RIGHT REAR	FAILED PART(S) <input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> REPLACEMENT
NO. OF FAILURES 1	DATE(S) OF FAILURE(S) 5-22-03	MANUFACTURER CONTACTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NHTSA PREVIOUSLY CONTACTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	MILEAGE AT FAILURE(S) 184259		
	VEHICLE SPEED AT FAILURE(S) 0		
APPLICABLE ACCIDENT INFORMATION			
ACCIDENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	FIRE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NUMBER PERSONS INJURED 0	NUMBER OF FATALITIES 0
		PROPERTY DAMAGE EST\$ _____	POLICE REPORTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
NARRATIVE DESCRIPTION OF FAILURE(S), ACCIDENT(S), INJURY(IES)			
frame failure - Major cracks. right side frame rail cracked behind front cross member.			
			CONTINUE ON BACK IF NEEDED
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.	