



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 231

Date Received: 2003 AUG -7 PH 5:20  
09-JUL-2003  
Repository   
Reference No. 10026891

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: ELKIN State: NC Zip Code: [Redacted]  
Daytime Telephone Number: [Redacted]  
Evening Telephone Number: [Redacted]  
E-mail Address: [Redacted]

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 or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 7/29/03

**VEHICLE INFORMATION**

Make: DODGE Model: DURANGO Model Year: 2000  
Date Purchased: July 2000 Dealer's Name and Telephone Number: 336 885 2165  
Original Owner: [Redacted] Dealer's City: ELKIN State: N.C. Zip Code: 28621  
Engine: No. Cylinders: 8 Fuel Type: Gas  
Transmission Type: Auto Antilock Brakes:  Cruise Control:  Powertrain: 4x4  
Vehicle Component Code: 141000 A/R BAGS:FRONTAL  
Multiple Failure: [Redacted]

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): July 1-03 Failure Mileage: 59333 Failure Speed: 288 50-60

**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: DOTM15ABC036): [Redacted] Original Equipment:  Prior Repair:  Failure Location: [Redacted]  
Tire Component Code: [Redacted] Tire Failure Type: [Redacted]

**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: 0 Number of Deaths: 0 Reported to Police: N Yes but did not Inv.

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).

CONSUMER STATES WHILE DRIVING 50-60 MPH AND AS A RESULT OF A CRASH AIR BAGS DID NOT DEPLOY. \*AK

Refer to Reference # 10026890

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.