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 1375

Date Received: 2003 AUG -7 PM 10:13 — 10-JUL-2003

Repository ☐

Reference No. 10026938

OWNER INFORMATION (Type or Print)

Name [redacted]

Address [redacted]

City PADUCAH | State KY | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number [redacted]

E-mail Address NONE

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an [redacted] provide your name or address to the vehicle manufacturer.

Signature of Owner [redacted] Date 7/25/03

VEHICLE INFORMATION

[redacted]

Make	Model	Model Year
DODGE	RAM	2003

Date Purchased	Dealer's Name and Telephone Number	Engine: No. Cylinders	Fuel Type:
1-30-2003	PARK AVENUE INC. 270-444-6901	8	GAS

Original Owner	Dealer's City	State	Zip Code
☒	PADUCAH	KY.	42001

Transmission Type		Powertrain	Vehicle Component Code
AUTO.	☒ Antilock Brakes ☒ Cruise Control		151300 SEAT BELTS;FRONT;RETRACTOR . Multiple Failure: -2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
FROM DAY PURCHASED			

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: DOTMAL9ABC096)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

CONSUMER STATES THAT BOTH THE DRIVER AND PASSENGER SAFETY BELTS DO NOT RETRACT ONCE PULLED FROM HOUSING AND HANG LOOSE WHEN SECURED DUE TO NO TENSION ON BELTS. BELTS HAVE BEEN PREVIOUSLY REPLACED, AND ONLY WORKED PROPERLY FOR 2 WEEKS, THEN PROBLEM REOCCURRED. *AK

SEAT BELTS TWIST AT TOP OF DOOR POST ALSO.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY