



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 100145

Date Received: 2003 AUG 15 AM 8:24 JUL 2003
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Reference No.: 10030059

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: LIVINGSTON State: MT Zip Code: [Redacted]

Daytime Telephone Number: [Redacted] E-mail Address: [Redacted]
Evening Telephone Number: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner: _____ Date: / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1B4HS2849WF152719
Make: DODGE Model: DURANGO Model Year: 1998
Date Purchased: 2003 Dealer's Name and Telephone Number: Yellowstone Country Motors
Original Owner: Dealer's City: Bozeman State: MT Zip Code: 59714 Engine: 8 Fuel Type: Unleaded
Transmission Type: Automatic Antilock Brakes Cruise Control Powertrain: _____
Vehicle Component Code: 021520 SUSPENSION:FRONT:CONTROL ARM:UPPER BALL JOINT
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 13-NOV-2002 Failure Mileage: 133000 Failure Speed: front end loose

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make: BF Goodrich Tire Model (Name or Number): All Season Tire Size (Example: P215/65R15): P225/70R15
DOT No. (Example: DOTM123ABC036) Original Equipment Prior Repair Failure Location: Dealership notified
Tire Component Code: _____ Tire Failure Type: loose front end

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: 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(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)).

VFRONT END HAD TO BE REPLACED BECAUSE OF THE UPPER BALL JOINTS FAILED. DEALER NOTIFIED. *AK

The front end had to be repaired ASAP because of loose steering. We replaced both control arms, ball joints & bushings for a total of \$1350. I'm glad we didn't experience the wheels falling off like others. This trip is not safe and fuel we got taken.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices. ATTACH ADDITIONAL SHEETS IF NECESSARY.
The Privacy Act of 1976-Public Law 95-579 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.