



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 10079

Date Received **2003 AUG 15 AM 10**
25-JUL-2003
Repository
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Reference No.
10030157

OWNER INFORMATION (Type or Print)

Name **[REDACTED]** Daytime Telephone Number **[REDACTED]** E-mail Address **[REDACTED]**
Address **[REDACTED]** Evening Telephone Number **[REDACTED]**
City **CARY** State **NC** Zip Code **[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 authorized signature, provide your name and address to the vehicle manufacturer.
Signature of Owner **[REDACTED]** Date **8/4/03**

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side **3B7HF13Z0UG [REDACTED]** Make **DODGE** Model **RAM 1500** Model Year **1997**
Date Purchased **04-97** Dealer's Name and Telephone Number **AL SMITH 919-839-7481** Engine: No. Cylinders **8** Fuel Type: **GAS**
Original Owner Dealer's City **[REDACTED]** State **[REDACTED]** Zip Code **[REDACTED]**
Transmission Type **AUTO** Antilock Brakes Cruise Control Powertrain **[REDACTED]** Vehicle Component Code **036000 SERVICE BRAKES, HYDRAULIC:ANTILOCK**
Multiple Failure: **1**

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) **25-JUL-2003** Failure Mileage **77300** Failure Speed **60** **BRAKES DID NOT FAIL. JUST DOES NOT STOP VERY WELL IN BACK STOP. CANT LOCK UP BRAKES KICKS ON ROLLING.**

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: DOTMALSABC036) 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 **[REDACTED]** Number of Deaths **[REDACTED]** Reported to Police **N**

Provide 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 WHEN THE BRAKES ARE APPLIED VEHICLE TAKES LONGER TO STOP. DEALER NOTIFIED. *AK

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

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to a strictly 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)

SEVERAL TIMES DURING PANIC STOPS I THOUGHT VEHICLES WOULD NEVER
COME TO A STOP, EVEN WHILE STANDING ON BRAKES. DOE RAN OUT
IN STREET IN FRONT OF TRUCK. COULDN'T STOP IN TIME + RAN OVER
DOG. SOBRIEST BRAKES I HAVE EVER HAD ON VEHICLE. WILL NEVER
OWN ANOTHER DODGE PRODUCT.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$300



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**



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and dial toll free at

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DOT Auto Safety Hotline
(DASH) 2 DOT



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<http://www.safercar.gov>