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

2003 SEP -2 AM 11:08

FOR AGENCY USE ONLY 100145

Date Received	Repository
06-AUG-2003	
	Reference No. 10032227

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
[redacted]	[redacted]	
Address [redacted]	Evening Telephone Number SAME	
City GREENSBORO / 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 a [redacted] *our name or address to the vehicle manufacturer.*
Signature of Owner [redacted] Date 8/18/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
2B3HD46R2XH576605	DODGE	INTREPID	1999

Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
Jan - 2000	VAN York 336-841-6200	No. Cylinders 8	GAS
Original Owner ☐	Dealer's City / State / Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTO	☑ Antilock Brakes ☑ Cruise Control		121000 EXTERIOR LIGHTING:HEADLIGHTS ✓
			Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
04-MAR-2003			FOGGED HEADLIGHT LENS

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: DOTHAL9ABC036)	☐ 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 STATE HEADLIGHT LENSES HAVE A THICK FILM OVER THEM ,CAUSING IMPAIRED VISION. DEALER NOTIFIED. *AK

THE HEADLIGHT LENS ARE VERY Cloudy ITS NOT MOISTURE IN THEM ITS LIKE THEY HAVE CLOUDED UP IN THE PLASTIC WHICH DOENT LOOK GOOD BUT MAINLY IT IS VERY HARD TO SEE TO DRIVE AT NIGHT AND VERY BAD AT NIGHT AND A REAL PROBLEM IN THE RAIN THANKS. [redacted]

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