



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](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100147

Date Received: 2003 OCT 12 PM 2:30  
10 SEP 2003  
Repository   
Reference No. 10038584

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: CANADA State: KY 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 authorized name or address to the vehicle manufacturer.  
Signature of Owner: [Redacted] Date: 9/18/03

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1B4HS28N1YF144123  
Make: DODGE Model: DURANGO Model Year: 2000  
Date Purchased: 6-3-03 Dealer's Name and Telephone Number: Walters Toyota 606-432-1451  
Original Owner:  Dealer's City: State: Zip Code: Engine: V8 Fuel Type: Gas  
Transmission Type: Automatic  Antilock Brakes  Cruise Control Powertrain: 4 wheel drive  
Vehicle Component Code: 021520 SUSPENSION:FRONT:CONTROL ARM/UPPER BALL JOINT  
Multiple Failure: 1

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

Incident Date(s): 24-AUG-2003 Failure Mileage: 39,872 Failure Speed: 25

**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: DOTM4SABC036)  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  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).

WHILE DRIVING, THE UPPER BALL JOINT FAILED, WHICH CAUSED THE CONSUMER TO LOSE CONTROL OF THE VEHICLE. \*JB  
Had to replace upper and lower Ball joints on both sides of the vehicle.

**UNITED CONSUMER DIVISION (U.S. DEPARTMENT OF JUSTICE)**

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 Administration 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.