



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

U.S. Department of Transportation National Highway Traffic Safety Administration

FOR AGENCY USE ONLY - 300079

Date Received

2004 APR - 8 PM 12:46 23-DEC-2003

Repository

Reference No.

10051979

OWNER INFORMATION (Type or Print)

Name

Address

City CRESTWOOD

State IL

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO

Signature of Owner

Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

1 B7 G622 NOYS - 538678

Make DODGE

Model DAKOTA

Model Year 2000

Date Purchased

12/99

Dealer's Name and Telephone Number

THOMAS Dodge

Engine: 4 7LT

No: Cylinders

8

Fuel Type:

Gas

87

Oct

Original Owner

Dealer's City

Delano Park

State

Zip Code

21 60462

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

Rack & Pinion Steering

821540 SUSPENSION; FRONT: CONTROL ARM; LOWER BALL JOINT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

23-DEC-2003

Failure Mileage

65000

Failure Speed

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: DOTM19ABC036)

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).

VEHICLE WAS TAKEN TO THE DEALER FOR ROUTINE MAINTENANCE. THE MECHANIC AT THE DEALER INDICATED THAT ALL FOUR BALL JOINTS FAILED PREMATURELY AND NEED TO BE REPLACED SOON. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. \*NLM

Lt upper B - Joint Rt upper B - Joint, Low Rt B - Joint, Low Lt B - Joint

Rack & Pinion & Vehicle Alignment were all required when vehicle went to shop to get fixed. Please call if you need any more info

Thank You

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice

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 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.