



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 100079

Date Received

Repository ☐

06 JAN 1:28
06-JAN-2004

Reference No.
10053432

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

City

KINGSLAND

State

GA

Zip Code

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, NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 01/17/2004

VEHICLE INFORMATION

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

1B7GL2AN11

Make

DODGE

Model

DAKOTA

Model Year

2001

Date Purchased

DEC 17 2003

Dealer's Name and Telephone Number

KINGS BAY MOTORS 912-576-7179

Original Owner

Dealer's City

KINGSLAND

State

GA

Zip Code

31518

Engine:

No. Cylinders

8

Fuel Type:

Gas

Transmission Type

AUTOMATIC

☒ Anti-lock Brakes

☒ Cruise Control

Powertrain

REAR WHEEL DRIVE

Vehicle Component Code

021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

06-JAN-2004

Failure Mileage

47408

Failure Speed

0

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

UNIROYAL

Tire Model (Name or Number)

TIGER PAW

Tire Size (Example P215/65R15)

P235/75R15

DOT No. (Example: DOTMALSABC036)

DOTMALSABC036

☐ 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).

VEHICLE FAILED GEORGIA STATE INSPECTION. TECHNICIAN INDICATED THE NEED TO REPLACE THE UPPER AND LOWER BALL JOINTS. *AK

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 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.