



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 100161

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21-JAN-2004

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OWNER INFORMATION (Type or Print)

Name [Redacted] Number [Redacted] E-mail Address [Redacted]
Address [Redacted]
City SPOKANE State WA Zip Code [Redacted] Evening Telephone Number [Redacted]

Do you authorize [Redacted] manufacturer of your vehicle? YES NO
In the absence of [Redacted] your name or address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 3-21-04

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side 1B4HS2BNSYF293439 Make DODGE Model DURANGO Model Year 2000
Date Purchased July 2003 Dealer's Name and Telephone Number [Redacted] Engine: No. Cylinders 8 Fuel Type: reg
Original Owner Dealer's City Spokane State WA Zip Code [Redacted]
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain 4 wd
Vehicle Component Code Q21520 SUSPENSION: FRONT: CONTROL ARM: UPPER BALL JOINT
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 20-JAN-2004 Failure Mileage 45000 Failure Speed [Redacted]

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: DOTM18ABC036) 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

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 A KNOCKING NOISE WAS HEARD COMING FROM THE FRONT END. VEHICLE WAS TAKEN TO THE DENVER SUPER FACILITY WHO DETERMINED THAT UPPER BALL JOINTS WORE OUT PREMATURELY. *AK

↑
also a power steering noise.

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.

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**