



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 100781

Date Received

Repository ☐

2004 FEB 26 AM 9:32
04-FEB-2004

Reference No.
10057525

OWNER INFORMATION (Type or Print)

Name

Address

City BIRCH RIVER

State WV

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
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner Date 2/16/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
3B7MC33D3BM120820

Make
DODGE

Model
3500

Model Year
1987

Date Purchased

Dealer's Name and Telephone Number

Michael Motors

Engine:

No. Cylinders

Fuel Type:

Diesel

Original Owner

Dealer's City

WASSAWAY

State

WV

Zip Code

26624

Transmission Type
MANUAL

☐ Antilock Brakes
☐ Cruise Control

Powertrain

Vehicle Component Code

073000 FUEL SYSTEM, GASOLINE:FUEL INJECTION SYSTEM

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Mileage

172000 +
180,000

Failure Speed

PARKED

FUEL SHUT OFF SOLENOID, BUT IT'S NOT FAILING
SOMETHING IS CAUSING IT
TO SHUT UP

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: DOTM15ABC036)

☐ 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(es).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

Narrative Description of Incident(s), Crash(es), and Injury(es).

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).

FUEL SHUT OFF 2000 SOLENOID OVERHEATED, CAUSING A FIRE IN THE VEHICLE. ALSO, VEHICLE STALLED. CONSUMER WAS ABLE TO EXTINGUISH THE FIRE. *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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

When the fuel shut off solenoid burns up it shuts off fuel to motor thereby shutting off motor thereby shutting off power brakes + steering. Had this fire occurred when I was on the interstate pulling or hauling a load what happens?

I was given the phone# of ~~the~~ Daimler Chrysler to contact. CORRESPONDENCE OF WHICH COPIES ATTACHED.

P.S.

AIR BAG'S DID NOT WORK

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



DIK W.V. 2687

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



**VEHICLE
OWNER'S**

QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM

OR

DASH2DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) & DOT



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.safercar.gov>

DAIMLERCHRYSLER

RECEIVED
1-8-04

DaimlerChrysler Corporation
Customer Claims Resolution Group

January 8, 2004

[REDACTED]
Birch River, WV [REDACTED]

Re: English, Harry
Vehicle: 1997 Dodge Ram 3500
VIN: 3B7MC33DXVM520820

Dear [REDACTED]

Thank you for contacting DaimlerChrysler Corporation with regard to the above referenced vehicle. I am in the process of reviewing your file and will inform you of our decision as soon as practicable. If I determine that a vehicle inspection is necessary, someone will contact you soon to set up an appointment convenient to your schedule.

If you have any questions regarding this matter, I may be reached at the number below.

Very truly yours,

John P. Hunt

John P. Hunt
Customer Claims Resolution Group
(866) 432-1DCX 1329
(248) 512-4051 (fax)
jph44@dcx.com

DAIMLERCHRYSLER

Received
1/29/04

DaimlerChrysler Corporation
Customer Claims Resolution Group

January 28, 2004

[REDACTED]
Birch River, WV [REDACTED]

Re: 1997 Dodge Ram 3500
Vin# 3B7MC33DXVM520820

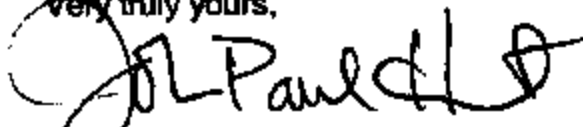
Dear [REDACTED]

Thank you for contacting DaimlerChrysler Corporation and raising concerns that you have with the above referenced vehicle. DaimlerChrysler Corporation conducted an investigation into the incident and inspected the vehicle.

Based on the information we received, DaimlerChrysler Corporation must deny your claim.

Thank you again for raising your concerns with DaimlerChrysler Corporation.

Very truly yours,



John Paul Hunt
Customer Claims Resolution Group