



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

2004 APR -1 PM 12:01

FOR AGENCY USE ONLY 100182

Date Received
26-FEB-2004

Repository

Reference No.
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OWNER INFORMATION (Type or Print)

Name
Address
City MOLINE State IL Zip Code

Daytime Telephone Number
Evening Telephone Number
E-mail Address

Do you authorize NHTSA, in the absence of an authorized representative of the manufacturer of your vehicle, to use your name or address to the vehicle manufacturer?
 YES NO
Signature of Owner Date 3/12/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1B7GG22N9YS650833
Make DODGE Model DAKOTA Model Year 2000

Date Purchased 5-00 Dealer's Name and Telephone Number BUYSSE Dodge 563)391-4100 Engine: 4.7 Fuel Type: GAS
No. Cylinders V-8

Original Owner Dealer's City DAVENPORT State IA Zip Code 52804

Transmission Type AUTO Antilock Brakes Cruise Control Powertrain 4.7, Auto, 4x4
Vehicle Component Code 012000 STEERING: COLUMN
Multiple Failure: 12

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 3/04 Failure Mileage 42500 Failure Speed ANY "Headlights" Low BEAMsgo off when steering wheel is Tilted DOWN, BAD (Broken) wire on multifunction harness

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: DOTM1A9ABC038) 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 to 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).

CONSUMER COMPLAINED ABOUT STEERING COLUMN/HEADLIGHTS. WHEN THE STEERING COLUMN WAS IN THE TILT UPRIGHT POSITION HIGH BEAM LIGHTS OPERATED. WHEN THE TILT STEERING WHEEL WAS IN THE STRAIGHT POSITION THE HIGH BEAM LIGHTS WENT OUT AUTOMATICALLY. *AK Low

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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)

All vehicle lights work correctly when the steering wheel is in the upmost position, multi function switch works normal. AS soon AS the tilt wheel is tilted downwards for driving the low beam headlights goes off. Tilt the steering wheel back upwards and the low beam lights come back on.

Found out low beam wire @ multi-function switch had broken at connection and shorting out!

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 75173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NHTL 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



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OR

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and dial toll free at

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(DASH) 2 DOT



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