



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 100184

Date Received

Repository

2004 MAR 26 11 09:22  
05-MAR-2004

Reference No.  
10061451

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

Evening Telephone Number

City

TAYLORSVILLE

State

NC

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 address or address to the vehicle manufacturer.

Signature of Owner

Date: 3/20/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side)

Make

DODGE

Model

DURANGO

Model Year

1998

Date Purchased

2000

Dealer's Name and Telephone Number

Steve White Dodge

Engine:

No. Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

Antilock Brakes

Powertrain

Cruise Control

Vehicle Component Code

021520 SUSPENSION:FRONT:CONTROL ARM:UPPER BALL JOINT

Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

01-MAR-2004

Failure Mileage

70000

Failure Speed

55

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: 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

0

Number of Deaths

0

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 AT 55 MPH CONSUMER HEARD A ROARING SOUND COMING FROM THE FRONT. ALSO, WHEN TURNING CORNERS THERE WAS A CLICKING SOUND COMING FROM THE FRONT WHEEL HUB. DEALER EXAMINED THE VEHICLE, BUT WAS UNABLE TO RESOLVE THE PROBLEM.

\*AK

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

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.