



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 <input type="checkbox"/>
2004 JUN 22 10:23 AM	Reference No. 21004238-28

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
Address	Evening Telephone Number	
City DARLINGTON State WI Zip Code	SAME	

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, please provide your name or address to the vehicle manufacturer.
Signature of Owner Date 6/1/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 307MU48C53	Make DODGE	Model 3500 DUALY	Model Year 2003
Date Purchased 12-02	Dealer's Name and Telephone Number LOUISBURG GARAGE 6067448700	Engine: No. Cylinders	Fuel Type: Diesel
Original Owner <input checked="" type="checkbox"/>	Dealer's City LOUISBURG, WIS 2049 LOUISBURG RD, CVR CITY	State WIS	Zip Code 53807
Transmission Type MANUAL	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain 4 WHEEL DRIVE	Vehicle Component Code 96000 OTHER
Multiple Failure: 1			

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 5-04	Failure Mileage 62000	Failure Speed ?	ALTERNATOR BRACKET BROKEN
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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: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
The 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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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).

THE VEHICLE WAS TAKEN TO THE DEALERSHIP FOR ROUTINE MAINTENANCE. THE TECHNICIAN NOTICED THAT THE ALTERNATOR BRACKET WAS BROKE. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. *NM

THE PIECE OF THE ALTERNATOR BRACKET ABOUT 5" LONG & 2" WIDE ACTUALLY BROKE AWAY & FELL OUT. IT COULD EASILY FELL INTO THE FAN OR FALLING TO THE GROUND COULD HAVE PUNCTURED THE TIRE. CALLED ANOTHER DODGE DEALERY & SAID THAT DODGE HAS A SERVICE BULLETIN THAT THESE

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.

BRACKETS ARE FAILING. NOT COVERED UNDER WARRANTY