



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
(1-888-327-4276)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 10079

Date Received: 22 JUN 2004

Repository

Reference No.
10079608

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Address: [Redacted]
City: ELKTON State: MD Zip Code: [Redacted]

Daytime Telephone Number: [Redacted]

E-mail Address: [Redacted]

Evening Telephone Number: [Redacted]

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 use your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted] Date: 7/1/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1B4HS28Y3WF [Redacted]

Make: DODGE Model: DURANGO Model Year: 1998

Date Purchased: 1998 Dealer's Name and Telephone Number: Country Chrysler / Plymouth

Original Owner: Dealer's City: Ford State: PA Zip Code: [Redacted]

Engine: No. Cylinders: 8 Fuel Type: Gas

Transmission Type: AUTOMATIC Antilock Brakes Powertrain: 4 WHEEL DRIVE

Cruise Control

Vehicle Component Code: Q21540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT

Multiple Failures: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 22 JUN 2004 Failure Mileage: [Redacted] 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): [Redacted] 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 CONSUMER HEARD A LOUD NOISE COMING FROM THE FRONT END. INDEPENDENT MECHANIC DETERMINED THAT FRONT LOWER ARM BALL JOINT WORE OUT. BUT THE PROBLEM WAS NOT YET RESOLVED. *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) The information is requested pursuant to authority vested in the National Highway Traffic Safety Act and its 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.