



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 241

Date Received

20-SEP-2004

Repository

Reference No.
10062769

2004 OCT 15 10 41

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City CLAWSON State MI Zip Code _____

Daytime Telephone Number

248/588-9066

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES

In the absence of an
Signature of Owner _____

Name or address to the vehicle manufacturer. Data DISC

VEHICLE INFORMATION

17 digit Vehicle (identification Number Located at bottom of windshield on driver's side) 307MU48C03C Make DODGE Model RAM 3600 Model Year 2003

Date Purchased
15-JUN-03

Dealer's Name and Telephone Number

TAMAROFF DODGE 248-384-0600

Engine:
No. Cylinders 6

Fuel Type:
Diesel

Original Owner

Dealer's City

SOUTHFIELD MICHIGAN

State

Zip Code

Transmission Type
MANUAL

Antilock Brakes
 Cruise Control

Powertrain
4 WHEEL DRIVE

Vehicle Component Code

102000 POWER TRAIN:MANUAL TRANSMISSION

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 16-SEP-2004 Failure Mileage 20000 Failure Speed _____

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: DOTM18ABC036)

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).

VEHICLE LURCHED FORWARD IN EVERY GEAR EXCEPT IN NETURAL WHEN DEPRESSING THE CLUTCH. DEALER REPLACED THE CLUTCH, BUT PROBLEM RECURRENT. *AK

→ WHEN STARTING ENGINE

TRANSMISSION WAS HARD TO SHIFT

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 condensed summary thereof, may be used in support of the agency's action.

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

CLUTCH CONTROL MODULE DEFECTIVE SLAVE
CYLINDER BLEEDING BACK INTO MASTER CYLINDER

WHOLE UNIT WAS REPLACED UNDER WARRANTY
OLD PARTS NOT AVAILABLE.

DEFECT CAUSED VEHICLE TO LURCH UNEXPECTEDLY
WHICH LED TO COLLISION WITH PARKED CAR

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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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, NHTSA-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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