



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

(1-888-327-4238)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1373

Date Received

Repository ☐

Reference No.

10103476

OWNER INFORMATION (Type or Print)

Name

Address

City

CARROLLTON

State GA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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

☒ YES

In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 12-22-04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

2B3HD46T7NH

Make

DODGE

Model

INTREPID

Model Year

1997

Date Purchased

8-10-97

Dealer's Name and Telephone Number

SCOTT EVANS DODGE 770-834-5050

Engine

No. Cylinders

6

Fuel Type

Gas

Original Owner

☐

Dealer's City

CARROLLTON

State

GA

Zip Code

30117

Transmission Type

Auto.

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

14-OCT-2004

Failure Mileage

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

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

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 CALLED LOCAL DEALER TO GET VEHICLE REPAIRED UNDER RECALL 04V021000, BUT NO PARTS WERE AVAILABLE. *AK

on 10-15-04

Safety recall - transaxle floor shifter
ignition / park interlock. Daimler
Chrysler notification C45

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