



U.S. Department
of Transportation
National Highway
Traffic Safety
Administration

Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS

888-327-4236

www.safercar.gov

OWNER INFORMATION (Type or Print)

Name			Daytime Telephone Number		
Street No.			Evening Telephone Number		
City		State	Zip Code		E-mail

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of authorization, NHTSA will provide a copy of this report to the vehicle manufacturer only during a defect investigation or when you make a complaint about recall performance on your vehicle.

Signature of Owner _____ Date 12/26/05

VEHICLE INFORMATION

17 digit Vehicle Identification number located at bottom of windshield on driver's side			Make	Model	Year	Current Mileage
3B7HJ18N9			DODGE	1500 QUAD CAB	2002	31843
Date Purchased	Dealer's Name and Telephone Number		Engine	Fuel Type:		
3/3/02	VACAVILLE DODGE 707-449-8900			<input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other		
<input type="checkbox"/> Original Owner	Dealer's City	State	Zip Code	No. Cylinders		
<input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	VACAVILLE	CA	95687	8		
Transmission Type		Powertrain		Rear-wheel Drive		
<input type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		<input type="checkbox"/> All-wheel Drive <input type="checkbox"/> Front-wheel Drive		<input type="checkbox"/> Rear-wheel Drive <input checked="" type="checkbox"/> Four-wheel Drive		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component Name	Incident Date(s)	Failure Mileage	Failure Speed	Failure Location
				<input type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Front <input type="checkbox"/> Rear

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make/Brand	Tire Model/Line	Tire Name	Tire Size (Example: P216/65R1105)
Failed Structure			DOT No. (Example: DOT MALGABC038 on sidewall)
<input type="checkbox"/> Tread <input type="checkbox"/> Sidewall <input type="checkbox"/> Bead			<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair
Failure Type:			
<input type="checkbox"/> Blowout <input type="checkbox"/> Blister <input type="checkbox"/> Crack <input type="checkbox"/> Torn <input type="checkbox"/> Tread Separation <input type="checkbox"/> Road Hazard <input type="checkbox"/> Out of Round			

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make	Date Manufactured	Model Number and Name
Seat Type		Installed in Vehicle using the:
<input type="checkbox"/> Infant <input type="checkbox"/> Booster <input type="checkbox"/> Integrated <input type="checkbox"/> Convertible <input type="checkbox"/> Other		<input type="checkbox"/> Vehicle safety belt <input type="checkbox"/> LATCH system* <small>*Vehicle info required</small>
Failed Part. Describe Failure Below		
<input type="checkbox"/> Base <input type="checkbox"/> Harness/Buckle <input type="checkbox"/> LATCH Connector <input type="checkbox"/> Shell <input type="checkbox"/> Handle <input type="checkbox"/> Other		

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Police Report No.
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A	N/A

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

This vehicle has a design flaw - i.e. extreme bump steer, that causes me as the driver, to lose momentary loss of control of the vehicle while traversing uneven road surfaces following turns in the highway. I have taken the vehicle to the local dealer who states that the problem is "bump steer" & because there are no recalls or Tech Bulletins to cover this design flaw, they can do nothing about the problem. The bump steer causes the truck to crowd-hop across the highway if rough road conditions are encountered while following a curve in the highway.

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-366-7182