



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 100216

Date Received

2015 FEB 11
11-FEB-2005

Repository ☐

Reference No.
10111394

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City DENTON State TX 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 ☒ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner _____ Date _____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1B3ED56F3R _____ Make DODGE Model INTRPID Model Year 1996
Date Purchased _____ Dealer's Name and Telephone Number JIM MCNATT DODGE 940-382-5481 Engine: No. Cylinders 6 Fuel Type: _____
Original Owner _____ Dealer's City _____ State _____ Zip Code _____
Transmission Type AUTOMATIC ☒ Antilock Brakes ☒ Cruise Control _____ Powertrain _____ Vehicle Component Code 021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 10-FEB-2005 Failure Mileage 151,000 Failure Speed 30MPH

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) ☐ 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 check all that apply to the incident. Failure, crash, and injury.)
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).

NHTSA RECALL 99V215000 ON THE ENGINE CRADLE. THE VEHICLE WAS TAKEN TO THE DEALER FOR THE RECALL. HOWEVER, THE DISTRICT
MANAGER IS REFUSING TO HONOR THE RECALL BECAUSE THE LOWER CONTROL ARM THAT ATTACHES THE BRACKETS IS BROKE. PLEASE
PROVIDE FURTHER DETAILS. "JB

ALL REPAIRS FINISHED USING NEW FACTORY
PARTS. NO CHARGES. NO FURTHER ACTION
NECESSARY. THANKS FOR YOUR HELP.

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.