



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 100146

Date Received

27-JUN-2005

Repository ☐

Reference No.

10126005

OWNER INFORMATION (Type or Print)

Name

Address

City

BEAR RIVER CITY

State UT

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

None

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 7/1/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side)

2071U3BC43K

Make

DODGE

Model

RAM

Model Year

2003

Date Purchased

18-OCT-03

Dealer's Name and Telephone Number

West Valley Dodge (801) 955-2448

Engine:

No. Cylinders 6

Fuel Type:

Diesel

Original Owner

☒

Dealer's City

West Valley City

State

UT

Zip Code

84140

Transmission Type

MANUAL

☒ Antilock Brakes

☒ Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

015200 STEERING-HYDRAULIC POWER ASSIST-HOSE, PIPING, AND

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

30-APR-2005

Failure Mileage

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

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 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).

DT: THE POWER STEERING GEAR BOX AND PUMP. TOOK TO DEALERSHIP AND THEY FIXED IT. *AK

When I went to turn a corner I realized that I had no control with steering wheel, I had lost all power steering within a 2 block radius. It caused me to run off the road.

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.