



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 100148

Date Received

Repository

2006 MAR 26 PM 2:20
05-MAR-2006

Reference No.
10162006

OWNER INFORMATION (Type or Print)

Name _____
Address _____
City MARKSVILLE State LA Zip Code _____

Daytime Telephone Number _____
Evening Telephone Number _____
E-mail Address _____

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 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1B3ES56C _____
Make DODGE Model NEON Model Year 2004
Date Purchased 29-JAN-05 Dealer's Name and Telephone Number M & M DODGE 318-445-8504 Engine: No. Cylinders 4 Fuel Type: Gas
Original Owner Dealer's City ALEXANDRIA State LA Zip Code 71301-2831
Transmission Type Antilock Brakes Cruise Control Powertrain FRONT WHEEL DRIVE Vehicle Component Code 103000 POWER TRAIN: AUTOMATIC TRANSMISSION
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 28-FEB-2006 Failure Mileage 7660 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: DOTM1A9ABC056) 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 CONTACT STATED THERE WAS A LEAK IN THE TRANSMISSION. THE VEHICLE WAS TAKEN TO THE DEALER FOR INSPECTION AND REPAIRS OVER 10 TIMES. THE DEALER REPLACED THE TRANSMISSION PAN, TRANSMISSION STICK, HEAD GASKET, BOLTS AND THE DEALER SENT THE VEHICLE TO A TRANSMISSION EXPERT. ALTHOUGH, THESE CHANGES WERE MADE, THE TRANSMISSION CONTINUES TO LEAK. THE DEALER RECENTLY DETERMINED THE PROBLEM CAN NOT BE DUPLICATED AND NO ADDITIONAL REPAIRS WERE MADE.

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.

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

Today's Date is 03-13-06. M+M Dodge called for us to bring car in to change the whole transmission. We will let them do that and see if it solves the problem. We appreciate your assistance. If the new transmission does not solve the leak problem we will be in touch with you. Again we appreciate your assistance, Thank you

ATTACH ADDITIONAL SHEETS IF NECESSARY



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.

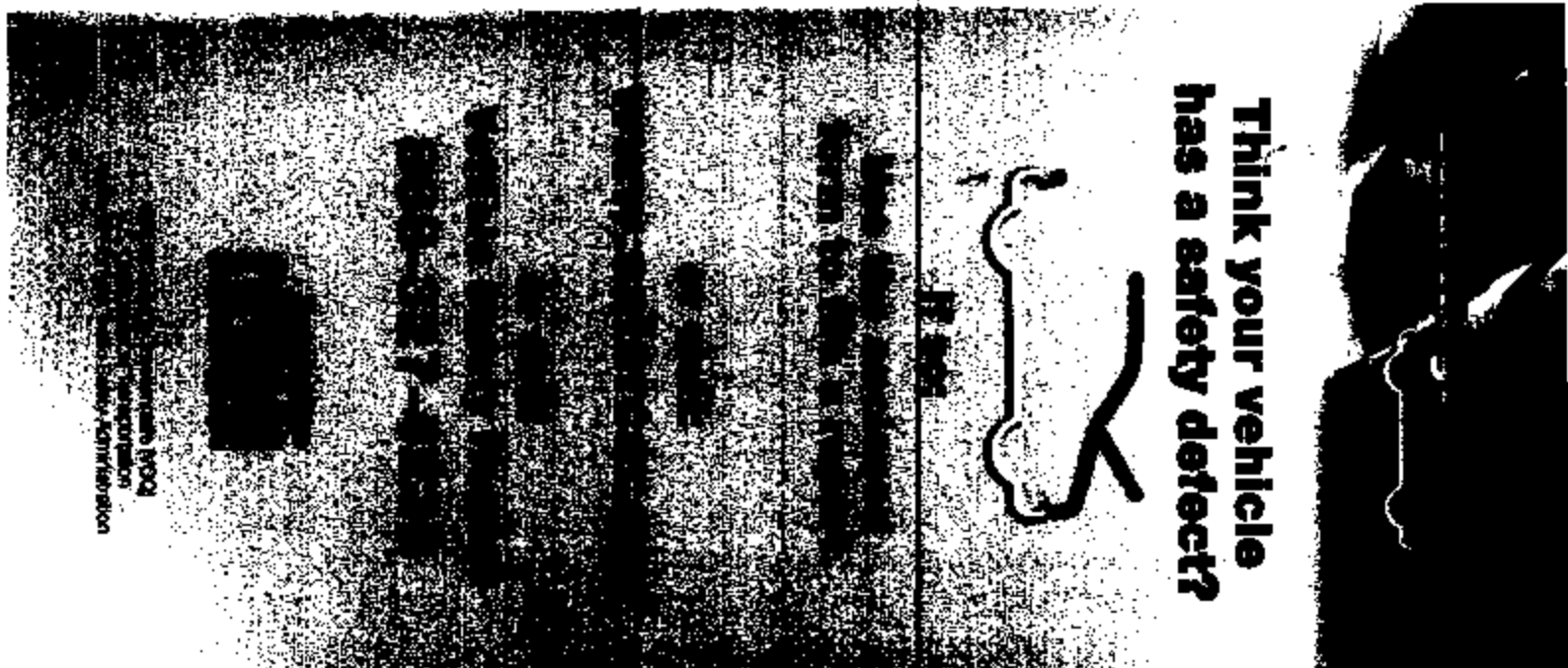
U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590

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



**Think your vehicle
has a safety defect?**

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