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
(1-888-327-4736)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

| Date Received | Repository ☐ |
|---|---|
| 14-JUN-2006 | Reference No. 10159853 |

## OWNER INFORMATION (Type or Print)

| Name | | Daytime Telephone Number | E-mail Address |
|---|---|---|---|
| Address | | | |
| City ANN ARBOR | State MI | Zip Co | 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 | Make | Model | Model Year |
|---|---|---|---|
| 4B3AU42N2XE | DODGE | AVENGER | 1999 |

| Date Purchased | Dealer's Name and Telephone Number | | | Engine: | Fuel Type: |
|---|---|---|---|---|---|
| 01-JAN-00 | CUETER CHRYSLER JEEP DODGE 734-971-5000 | | | No. Cylinders 6 | Gas |
| Original Owner ☒ | Dealer's City | State | Zip Code | | |

| Transmission Type | | Powertrain | Vehicle Component Code |
|---|---|---|---|
| AUTOMATIC | ☒ Antilock Brakes ☒ Cruise Control | FRONT WHEEL DRIVE | 021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT |
| | | | Multiple Failure: 1 |

## FAILED COMPONENT(S)/PART(S) INFORMATION

| Incident Date(s) | Failure Mileage | Failure Speed | |
|---|---|---|---|
| 13-JUN-2006 | 32000 | 0 | |

## 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: DOTMAL9ABC036) | ☐ 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), Fatality(s), Crash(es), and Injury(ies).)*

| Crash | Fire | Number of Persons Injured | Number of Deaths | Reported to Police |
|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | 0 | 0 | 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 WHILE DRIVING AT VARIOUS SPEEDS THERE WAS EXCESSIVE PLAY IN THE STEERING WHEEL. THE VEHICLE WAS TAKEN TO THE REPAIR SHOP WHO DETERMINED THE FRONT LOWER BALL JOINTS HAD SEPARATED AND NEEDED REPLACED. THE MANUFACTURER WAS ALERTED AND EXPLAINED FOR THE CONTACT TO CALL THE NHTSA REGARDING THE ISSUE. *NM

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY