



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

AM 7:41  
05-FEB-2007

Reference No.  
10181567

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City DARDENNE PRAIRIE Prairie State MO Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED] *copy*

Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 2/13/07

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
104HB48044F [REDACTED] Make DODGE Model DURANGO Model Year 2004

Date Purchased 10/4/04 Dealer's Name and Telephone Number ZEISER DODGE 636-926-2110 Engine: No: Cylinders 8 Fuel Type: Gas

Original Owner  Dealer's City ST. PETERS State MO Zip Code [REDACTED]

Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 110000 ELECTRICAL SYSTEM *Power train: Automatic Transmission: Control module (TCM, PCM)* Multiple Failure: 2

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

Incident Date(s) 05-JAN-2007 Failure Mileage 27,441 Failure Speed 15 Engine Stall

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]

DOT No. (Example: DOTM9ABC036)  Original Equipment  Prior Repair Failure Location: [REDACTED]

Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]

Seat Type: [REDACTED] Installation System: [REDACTED]

Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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 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).

TL\*- THE CONTACT STATED THAT THE 2004 DODGE DURANGO LOST POWER ON 01/05/07. THE CONTACT STATED THAT WHILE COMING TO A STOP ~~AND~~ WHILE TRAVELING AT 15 MPH AND TRYING TO COME TO A STOP. THE BRAKES DIDN'T ENGAGE WHEN THE VEHICLE LOST POWER. THIS HAPPENED DURING AN EVENING IN WHICH THE ROAD CONDITIONS WERE DRY AND CLEAR. LAST SUMMER WHEN THE FAILURE OCCURRED, HE CONTACT THE DEALERSHIP, AND WAS TOLD THAT SINCE THE ENGINE LIGHT DIDN'T APPEAR THERE WAS NOTHING THEY COULD DO TO THE VEHICLE. THE CONTACT STATED THAT HE FILED A COMPLAINT WITH THE MANUFACTURER, AND THEY CAME TO INSPECT THE VEHICLE AND FOUND NOTHING WRONG WITH THE VEHICLE. THE CONTACT CASE # FOR DODGE MANUFACTURERS IS # 15848035 AND THIS CASE WAS DONE ON 01/08/07. THE CONTACT FOUND A DEFECT INVESTIGATION WITH NHTSA ACTION# EA05018.

*The engine stalled when the engine stalls, the power brakes do no longer work which caused the accident. Zeiser Dodge stated no engine codes were left due to the stall.*

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 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)**

*My wife was driving with my 1 year old daughter in the car with her. She slowed down coming toward a stop light with a car in front of her. As she slowed, the engine stalled and she lost the power brakes. She ran into the car in front of her.*

*I called Chrysler Customer Service to report the issue/defect but they quickly closed the case after conducting a short investigation.*

ATTACH ADDITIONAL SHEETS IF NECESSARY

MAIL ROOM  
TRAFFIC SAFETY ADM  
400 7TH ST SW  
WASHINGTON DC 20590

OFFICIAL BUSINESS



NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**

FIRST-CLASS MAIL PERMIT NO 1888 WASHINGTON DC

POSTAGE WILL BE PAID BY ADDRESSEE

US DEPARTMENT OF TRANSPORTATION  
NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION  
OFFICE OF DEFECTS INVESTIGATION, NVS-210  
400 7TH ST SW  
WASHINGTON DC 20077-8214



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



**If so:**

**Use the enclosed  
form to file a report.**

**or visit:**

**www.safercar.gov**

**or call:**

**Vehicle Safety Hotline  
888-327-4236**

www.nhtsa.gov  
**NHTSA**

Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration



# FIRST NOTICE OF LOSS

Claim Number: 00-141-739871

Date of Loss: 1/08/2007 @ 6:30pm  
 Policy Number: [REDACTED]  
 Policyholder: [REDACTED]  
 Claim Status: Closed

## Claim Information

**Cause:** Accident (Collision)  
**Location:** Hwy N Near Winghaven Blvd - O Fallon MO  
**Description:** INSD WAS HIT BRAKES TO STOP AT STOP SIGN, BRAKES FAILED , INSD SWERVED TO RIGHT AND CLIPPED CLMT AHEAD OF HER.  
**Claim Comments:** INSD INFORMED OF 250 DED COLL/ 0 DED COMP UM, MED, ERS AND 40 PER DAY/960 MAX. 2 BUS DAYS FOR ADJ MLS054CCC  
**Authorization Comments:** NONE GIVEN  
**Police/Fire Comments:** NO POLICE CALLED/ ADVISED TO FILE A POLICE REPORT.  
**Vehicles:** 2 **Injuries:** 1

## Loss Information

### Insured Vehicle Information (Vehicle 1)

**Name 1:** [REDACTED] /Policyholder  
 O FALLON MO [REDACTED]

Phone Type	Area Code	Phone Number	Extension	Comment
Home	[REDACTED]	[REDACTED]	[REDACTED]	8-7PM
Cell	[REDACTED]	[REDACTED]	[REDACTED]	8-7PM/[REDACTED]
Cell	[REDACTED]	[REDACTED]	[REDACTED]	8-7PM/[REDACTED]

**Email:** [REDACTED]  
**Comments:**

**Vehicle:**  
**Year/Make/Model:** 2004/DODGE/DURANGO SLT  
**Mileage or Hours:**  
**Drivable:** Yes  
**Vehicle Location:** Drivable  
**Possible Total Loss:** No  
**Damages:** Sides, Front  
**Damage Description:** FRONT BUMPER COVER

### Drive-In Information

**Drive-In Location:**  
**Drive-In Date:**  
**Drive-In Time:**

### Inspection/Repair Information

**CRP:** Yes  
**Comments:** ZEISER DODGE, ST PETERS, MO INSD IS FILING A CLAIM AGAINST DODGE FOR THE BRAKE PROBLEM.

### Insured Vehicle Occupant Information

**Name 2:** [REDACTED] /Owner/Driver  
 O FALLON MO [REDACTED]

Phone Type	Area Code	Phone Number	Extension	Comment
Home	[REDACTED]	[REDACTED]	[REDACTED]	8-7PM
Cell	[REDACTED]	[REDACTED]	[REDACTED]	8-7PM/[REDACTED]

Cell [REDACTED] [REDACTED] 8-7PM/[REDACTED]

Email: [REDACTED]  
 Comments: [REDACTED]

Injury: Yes  
 Fatality: No  
 Injury Description: BACK IS SORE / WILL SEE A DR IF NEEDED.  
 Citation:

Name 3: [REDACTED] Passenger  
 [REDACTED]  
 O FALLON MO [REDACTED]

Phone Type	Area Code	Phone Number	Extension	Comment
Home	[REDACTED]	[REDACTED]		8-7PM

Email:  
 Comments: 1 YR OLD DAUGHTER.

Injury: No  
 Property Damage: Yes  
 Property Damage Description: CHILD'S CAR SEAT DAMAGE  
 Citation:

**Other Vehicle/Occupant Information (Vehicle 2)**

**Vehicle:**  
 Year/Make/Model: Unknown  
 Mileage or Hours:  
 Drivable: Yes  
 Vehicle Location: Drivable  
 Possible Total Loss: No  
 Damages: Sides, Rear  
 Damage Description: REAR PS BUMPER

Name 1: [REDACTED] /Owner/Driver

Phone Type	Area Code	Phone Number	Extension	Comment
Home	[REDACTED]	[REDACTED]		UNK
Cell	[REDACTED]	[REDACTED]		UNK

Email:  
 Comments: CLMT HAS STATE FARM INS. POL. # [REDACTED]  
 AGENT IS HANK WEISE PH # 636-936-2460

Injury: No  
 Property Damage:  
 Citation:

**Policy Information**

**Agent:** RANDOLPH J KRAEMER  
**228/160** 7004 Monticello Ste E  
Barnhart MO 63012  
(636) 464-1221  
rkraemer@amfam.com

**Risk:** 2004 DODGE DURANGO SLT  
VIN# 1D4HB48D44F [REDACTED]  
**Policy:** Family Private Passenger Auto - MO  
**Status:** Active  
**Inception:** 11 / 08 / 1996

**Third Party Interest:**

DC FIN SVCS AMER LLC (LienHolder1)  
Po Box 9224  
Farmington Hills MI 48333-9224

**Coverages:** Collision - Per Occurrence : Deductible \$250  
Comprehensive - Per Occurrence : Deductible \$0  
Bodily Injury - Per Person : \$100,000  
Bodily Injury - Per Occurrence : \$300,000  
Property Damage - Per Occurrence : \$100,000  
Uninsured Motorist - Per Person : \$50,000  
Uninsured Motorist - Per Occurrence : \$100,000  
Medical Expense - Per Person : \$5,000  
Emergency Road Service

**Endorsements:** END110-3 Auto Rental Reimbursement Coverage - Per Day: \$40  
END110-3 Auto Rental Reimbursement Coverage - Maximum: \$960  
END28 Lease/Loan Gap Coverage Endorsement  
END31-2 Additional Interest

**Comments:** No Comments

**Assignment:**

00-141-739871

**Claim Office:** St Louis  
**Claim Office Phone Number:** (314) 991-0070 x54345  
**Routing Zip Code:** 63368  
**Routing Zip Type:** Policy Zip Code  
**Agent/District Code:** 228/160

**Reported by:** [REDACTED] by Phone [REDACTED] on 1/09/2007 @ 9:53am  
**Entered by:** MLS054 on 1/09/2007 @ 9:58am via Claim Call Center

END OF REPORT

ZEISER MOTORS, INC  
4951 VETERANS MEMORIAL PARKWAY  
ST. PETERS, MO 63376  
BODY SHOP OFFICE: 636-926-3912 EXT. 3049 FAX: 636-926-0744

\*\*\* ESTIMATE \*\*\*

RO# 146538

01/10/2007 04:46 PM

Owner:

Owner: [REDACTED]  
Address: [REDACTED] : [REDACTED]  
City State Zip: O FALLON, MO [REDACTED]

Control Information

Claim #: 00141739871-0C Insured Policy #: [REDACTED]  
Loss Date/Time: 01/08/2007 Loss Type: Collision  
Deductible: \$250.00  
City State Zip: MO FAX:  
Insured: [REDACTED]  
Address: [REDACTED]

Inspection

Inspection Date: 01/10/2007 04:46 PM Inspection Type: Direct Repair Program  
Primary Impact: Front Secondary Impact:  
Driveable: No Rental Assisted:  
Assigned Date/Time: Received Date/Time: 01/11/2007 07:55 AM  
First Contact Date/Time: Appointment Date/Time: 01/10/2007 06:00 AM  
Appraiser Name: RON WALTERS Appraiser License #:

Repairer

Repair Start Date/Time: Vehicle Drop Off Date/Time: 01/09/2007  
Target Complete Date/Time: Days To Repair: 2

Remarks

assessed for american family insurance. for questions concerning vehicle  
repairs or rental extension, please contact solera, 18887765372

Vehicle

2004 Dodge Durango SLT 4 DR Wagon  
8cyl Gasoline 5.7 HEMI  
5 Speed Automatic

Lic. Plate: 812XGR Lic State: MO  
Lic Expire: VIN: 1D4HB48D44F [REDACTED]  
Prod Date: Mileage: 27,441  
Veh Insp#: Mileage Type: Actual  
Condition: Code: N7113A  
Ext. Refinish: Two-Stage Int. Refinish:

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**Options**

Alarm System	Anti-lock Brakes	Auto Locking Hubs (4WD)
Center Console	Compact Disc Player	Cruise Control
Dual Air Conditioning	Dual Airbags	Fog Lights
Heavy Duty Suspension	Intermittent Wipers	Keyless Entry System
Lighted Entry System	Power Brakes	Power Door Locks
Power Drivers Seat	Power Mirrors	Power Steering
Power Windows	Privacy Glass	Rear Heater
Rear Window Defroster	Rear Window Wiper/Washer	Roof/Luggage Rack
Styled Steel Wheels	Tachometer	Third Seat (trucks)
Tilt Steering Wheel	Tinted Glass	Tonneau/Cargo Cover
Velour/Cloth Seats	4-Wheel Drive	

**Damages**

Line	Op	Guide	MC	Description	MFR Part No.	Price	ADJ%	B%	Hours	R
1	E	5	46	Bumper,Front	55077497AC	\$138.00			2.8	SM
2	L	5		Bumper,Front	Refinish				0.9	RF
					0.9 Surface					
3	EP	85		Cover,Front Bumper	Replace PXN	\$187.00			INC	SM
4	L	85	13	Cover,Front Bumper	Refinish				3.5	RF
					2.4 Surface					
					0.6 Two-stage setup					
					0.5 Two-stage					
5	E	269		Supt,Frt Bumper Cover	55077564AE	\$111.00			INC	SM
6	E	9		Bracket,License Mtg	55077833AA	\$3.45			0.2	SM
7	I			SEND TO SERVICE FOR C	Repair				0.5*	SM*
8	E	129		Brkt,Front Bumper Mtg LT	52855301AD	\$14.35			0.3	SM
9	E	130		Brkt,Front Bumper Mtg RT	52855301AD	\$14.35			0.3	SM
10	EC	M03		Flex Additive	Replace Economy	\$5.00*				RF
11	EC	M60		Hazardous Waste Removal	Replace Economy	\$3.00*				SM

11 Items

MC	Message
13	INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE
46	PRINTABLE ALTERNATE PARTS COMPARE

**Estimate Total & Entries**

Gross Parts	\$281.15
Other Parts	\$195.00
Paint Materials	\$127.60
Parts & Material Total	\$603.75
Tax on Parts & Material @ 7.550%	\$45.58

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$54.00	3.6	0.5	4.1	\$221.40
Mech/Elec (ME)	\$54.00				
Frame (FR)	\$54.00				
Refinish (RF)	\$54.00	4.4		4.4	\$237.60
Paint Materials	\$29.00				

Labor Total	8.5 Hours	\$459.00
Towing		\$124.00
Gross Total		\$1,232.33
Less: Deductible		\$250.00-
Net Total		\$982.33

Alternate Parts Y/02/01/00/01/01 CUM 02/01/00/01/01 Zip Code: 63376 Geo 63376

Recycled Parts Y/0/0 Zip Code: 63376 INV DATE: 01/10/2007

Audatex Estimating 4.0.469 ES 01/11/2007 12:25 PM REL 4.0.469 DT 12/01/2006 DB 12/15/2006

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1.1 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.

DAMAGE ASSESSED FOR AMERICAN FAMILY INSURANCE. FOR QUESTIONS CONCERNING THE VEHICLE REPAIR STATUS, PLEASE CONTACT SOLERA, (888) 776-5372.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE PARTS MANUFACTURER OR DISTRIBUTOR RATHER THAN BY THE MANUFACTURER OF YOUR VEHICLE.

**Op Codes**

* = User-Entered Value	E = Replace OEM	NG = Replace NAGS
EC = Replace Economy	OE = Replace PXN OE Srpls	UE = Replace OE Surplus
ET = Partial Replace Labor	EP = Replace PXN	EU = RECYCLED PART
TE = Partial Replace Price	PM = Replace PXN Reman/Rebit	UM = Replace Reman/Rebuilt
L = Refinish	PC = Replace PXN Reconditioned	UC = Replace Reconditioned
TT = Two-Tone	SB = Sublet Repair	N = Additional Labor
BR = Blend Refinish	I = Repair	IT = Partial Repair
CG = Chipguard	RI = R & I Assembly	P = Check
AA = Appearance Allowance	RP = Related Prior Damage	



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2004 Dodge Durango SLT 4 DR Wagon  
Claim #: 00141739871-0C

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**Estimate Summary Page**

**RON WALTERS**

<b>Gross Total</b>	<b>\$1,232.33</b>
<b>Less: Deductible</b>	<b>\$250.00-</b>
<b>Net Total</b>	<b>\$982.33</b>

Audatex Estimating 4.0.469 ES 01/11/2007 12:25 PM REL 4.0.469 DT 12/01/2006 DB 12/15/2006

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# DAIMLERCHRYSLER

DaimlerChrysler Corporation  
Customer Claims Resolution Group

January 31, 2007

**Via U.S. Mail**

[REDACTED]  
[REDACTED]  
DARDENNE PR, MO [REDACTED]

**Re: 2004 Dodge Durango, VIN 1D4HB48D44F [REDACTED]**

Dear [REDACTED]

Thank you for contacting DaimlerChrysler Corporation and raising concerns that you have with the above referenced vehicle. DaimlerChrysler Corporation conducted an investigation into the incident and inspected the vehicle.

The inspector found no indication of a manufacturing defect that caused or contributed to the incident of January, 2007. Specifically, the inspector checked the engine, brakes, and airbags and found that they all operate as designed.

Based on our review of this matter, DaimlerChrysler Corporation is denying your claim. Thank you again for raising your concerns with DaimlerChrysler Corporation. We suggest further inquires be directed to your insurance company.

Very truly yours,

Customer Claims Resolution Group