



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

03-DEC-2008

Repository

Reference No. 10250600

OWNER INFORMATION (Type or Print)

Name

Address

City SARTELL

State MN

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 12/20/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1B3EJ56U81

Make DODGE

Model STRATUS

Model Year 2001

Date Purchased 6-6-01

Dealer's Name and Telephone Number Brand Motors

Engine: No: Cylinders 4

Fuel Type:

Original Owner

Dealer's City LITTLE FALLS

State MA

Zip Code

Transmission Type auto

Antilock Brakes Cruise Control

Powertrain

Multiple Failure:

Incident Date(s) 04-NOV-2008

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING

Failure Mileage 62890

Failure Speed 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: 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 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 OWNS A 2001 DODGE STRATUS. WHILE THE VEHICLE WAS PARKED IN A LOADING ZONE, THE ENGINE SUDDENLY SHUT OFF. THE VEHICLE MADE A ROKING NOISE AND THE CONTACT ATTEMPTED TO RESTART THE VEHICLE, BUT WAS UNSUCCESSFUL. THE VEHICLE WAS TOWED TO THE DEALER AND THEY STATED THAT THE WATER PUMP, OIL GASKET, AND TIMING BELT FAILED. THE VEHICLE WAS TOWED TO A DIFFERENT SHOP FOR A LESS EXPENSIVE REPAIR. THE NEW REPAIR SHOP CONFIRMED THE SAME FAILURES, IN ADDITION TO OIL CONTAMINATION AND THE ENGINE NEEDED TO BE REPLACED. THE VEHICLE IS CURRENTLY AT A LOCAL REPAIR SHOP. THE CURRENT AND FAILURE MILEAGES WERE 62,890.

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.