



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:

07-MAY-2009

Repository

Reference No.
10267954

OWNER INFORMATION (Type or Print)

Name

Address

City

APOLLO

State

PA

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 _____

VEHICLE INFORMATION

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

2B3HD46R628

Model

Model Year

INTREPID

2002

Date Purchased

05-30-08

Dealer's Name and Telephone Number

ALL SEASON AUTO SALES

Engine: 2.7

No. Cylinders: 6

Fuel Type:

Original Owner

Dealer's City

SPRINGDALE

State

MA

Zip Code

Transmission Type

AUTO

Antilock Brakes

Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)

01-MAY-2009

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING

Failure Mileage

84000

Failure Speed

20

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: DOTM9ABC036)

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 2002 DODGE INTREPID. WHILE DRIVING 20 MPH, THE ENGINE HESITATED AND LOST POWER COMPLETELY. THE CONTACT PUSHED THE VEHICLE TO THE SIDE OF THE ROAD. THE VEHICLE WOULD NOT RESTART. HE WAITED TWO HOURS BEFORE THE VEHICLE MANAGED TO RESTART AND THEN DROVE IT TO A MECHANIC. THE CONTACT WAS INFORMED THAT THE OIL RESERVOIR WAS FULL OF COOLANT AND ANTIFREEZE, WHICH WAS COMMON FOR HIS TYPE OF VEHICLE. HE TOOK THE VEHICLE TO ANOTHER SHOP AND WAS INFORMED OF THE SAME THING, INCLUDING THAT THE ENGINE NEEDED TO BE REPLACED. THE MANUFACTURER STATED THAT THEY WERE NOT RESPONSIBLE FOR THE DEFECT. THE CONTACT FEELS THAT A RECALL SHOULD BE ISSUED. THE CURRENT AND FAILURE MILEAGES WERE 84,000.

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.