

 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		
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received MAY 03 2010 08-MAR-2010		Repository ☐
						Reference No. 10317760
OWNER INFORMATION (Type or Print)						
Name			Daytime Telephone Number		E-mail Address	
Address			Evening Telephone Number			
City	State	Zip Code				
TURNERSVILLE	NJ					
<i>The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).</i>						
VEHICLE INFORMATION						
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side			Make	Model	Model Year	
1B3HB48A39D			DODGE	CALIBER	2009	
Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:	
				No: Cylinders		
Original Owner	Dealer's City	State	Zip Code			
☐						
Transmission Type	☐ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)		
	☐ Cruise Control			26-DEC-2009		
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Codes: 100000 POWER TRAIN, 103500 POWER TRAIN: AUTOMATIC TRANSMISSION: LEVER AND LINKAGE: FLOOR SHIFT				Failure Mileage	Failure Speed	
				16027 1627		
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	Failure Location:			
		☐ Prior Repair				
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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police		
☒ Yes ☐ No	☐ Yes ☒ No	1		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 2009 DODGE CALIBER. ON DECEMBER 26, 2009 WHILE TAKEN PACKAGES OUT THE VEHICLE THE GEAR SHIFT FAILED AND THE VEHICLE REVERSED ON ITS OWN. SHE WAS STRUCK BY THE DRIVER'S SIDE DOOR. THE CONTACT RECEIVED INJURIES TO THE RIGHT SIDE OF THE BODY. THE VEHICLE STOPPED WHEN IT COLLIDED INTO A SNOW EMBANKMENT. THE VEHICLE WAS TOWED TO THE DEALER. THE DEALER REPLACED THE VEHICLE SHIFTER ASSEMBLY. THE VEHICLE WAS TRADED. THE FAILURE AND THE CURRENT MILEAGE WAS 16,027. 1627						
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.						

[REDACTED] BLACKWOOD NJ [REDACTED]		VEHICLE IDENTIFICATION		MILEAGE OUT	DATE OUT	INVOICE NO.
		1B3HB48A39D [REDACTED]		1627	01/11/10	16584 PART-CLOSE
		YEAR	MAKE	MODEL	COLOR	TAG NO.
		09	DODGE	CALIBER SX	SILVER	00776
CUST. NO.	LICENSE	HOME PHONE	WORK PHONE	STOCK NO.	PROD. DATE	SERV. ADV.
		[REDACTED]	[REDACTED]		00/00/00	DM 8558DM
CUST. LABOR RATE	DELIV. DATE	DELIV. MILES	MILEAGE IN	DATE IN	IN-SERV. DATE	
	00/00/00		1627	01/06/10	00/00/00	

ALL OF US HERE AT ATLANTIC HOPE YOUR SERVICE EXPERIENCE WAS A PLEASANT ONE. IF YOU ARE NOT "COMPLETELY SATISFIED" PLEASE CONTACT MICHAEL MORRIS FOR CHRYSLER, JEEP, KIA

VOLKSWAGEN, AND AUDI AS OUR GOAL IS NOTHING LESS THAN PERFECT.

LINE	OP. CODE	FAIL-CD	TECH.	HOURS/QT	TYPE	AMOUNT
A						
Com TRANS DIAGNOSIS; CUST STATES WHEN PUTTING IN PARK & GETTING OUT OF THE CAR IT WILL GO INTO REVERSE BY ITSELF						
Cau ck found shifter assembly						
Cor replaced shifter assembly						
	01250HR		A86 7046		W	
	68020485AD		SHIFTER	TRANS	1 W	
Line Total.....						

TOTAL-CUSTOMER

NoCharge

CUSTOMER COPY - PAGE 01

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/items. The Seller hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/items.

CUSTOMER SIGNATURE

On behalf of servicing dealer, I hereby certify that the information contained hereon is accurate unless otherwise shown. Warranty services described were performed at no charge to owner. There was no indication from the appearance of the vehicle or otherwise, that any part repaired or replaced under this claim had been connected in any way with any accident, negligence or misuse. Records supporting this claim are available for (1) year from the date of payment notification at the servicing dealer for inspection by manufacturer's representative.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)