

INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

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|  <p>U.S. Department of Transportation<br/>National Highway Traffic Safety Administration</p>                                                                                                                                                                                                                                                                                                                                                                                                              |  | <p><b>DOT Auto Safety Hotline</b></p> <p><b>Vehicle Owner's Questionnaire</b><br/>To Report Vehicle Safety Defects<br/>1-888-DASH-2-DOT<br/>(1-888-327-4236)<br/>INTERNET: www.nhtsa.dot.gov/hotline</p> |  | FOR AGENCY USE ONLY 100148                                                   |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <p>Date Received<br/>05-MAR-2015</p>                                                                                                                                                                     |  | <p>Repository <input type="checkbox"/></p> <p>Reference No.<br/>10692270</p> |  |
| OWNER INFORMATION (Type or Print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                          |  |                                                                              |  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | Address                                                                                                                                                                                                  |  | Daytime Telephone Number                                                     |  |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | State                                                                                                                                                                                                    |  | Evening Telephone Number                                                     |  |
| MANDEVILLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | LA                                                                                                                                                                                                       |  |                                                                              |  |
| <p>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).</p>                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                          |  |                                                                              |  |
| VEHICLE INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                          |  |                                                                              |  |
| 17 digit Vehicle Identification Number Located at bottom of windshield on driver's side<br>1D7HA18D53                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Make<br>DODGE                                                                                                                                                                                            |  | Model<br>RAM 1500                                                            |  |
| Model Year<br>2003                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | Date Purchased<br>2003                                                                                                                                                                                   |  | Dealer's Name and Telephone Number<br>LAMARQUE DODGE                         |  |
| Original Owner<br><input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  | Dealer's City<br>NEW ORLEANS                                                                                                                                                                             |  | Engine:<br>No: Cylinders<br>8                                                |  |
| Transmission Type<br><input checked="" type="checkbox"/> Antilock Brakes<br><input checked="" type="checkbox"/> Cruise Control                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | Powertrain                                                                                                                                                                                               |  | Multiple Failure:                                                            |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                          |  | Incident Date(s)<br>05-MAR-2015                                              |  |
| FAILED COMPONENT(S)/PART(S) INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                          |  |                                                                              |  |
| Vehicle Component Code: 140000 AIR BAGS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                          |  | Failure Mileage                                                              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                          |  | Failure Speed                                                                |  |
| 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)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | <input type="checkbox"/> Original Equipment<br><input type="checkbox"/> 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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                                                                              |  | Number of Persons Injured<br>0                                               |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                          |  | Number of Deaths<br>0                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                          |  | Reported to Police<br>N                                                      |  |
| <p><b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b><br/>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).</p>                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                          |  |                                                                              |  |
| <p>TL*THE CONTACT OWNS A 2003 DODGE RAM 1500. THE CONTACT RECEIVED A NOTIFICATION FOR NHTSA CAMPAIGN ID NUMBER: 14V770000 (AIR BAGS) AND STATED THAT THE PART NEEDED WAS UNAVAILABLE TO REPAIR THE VEHICLE. THE DEALER WAS UNABLE TO SPECIFY WHEN THE PART WOULD BECOME AVAILABLE. THE MANUFACTURER WAS NOT NOTIFIED OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE.</p>                                                                                                                                                                                                          |  |                                                                                                                                                                                                          |  |                                                                              |  |
| <p>Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                          |  |                                                                              |  |
| <p>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.</p> |  |                                                                                                                                                                                                          |  |                                                                              |  |