

 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		INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) FOR AGENCY USE ONLY 100148	
		Date Received 09-JUL-2015 SEP 03 2015		Repository ☐ Reference No. 10732930	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address					
City	State	Zip Code	Evening Telephone Number		
KILLEEN	TX				
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).					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
1C6RR6NT6FS		RAM	1500	2015	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
05-25-2015	Mott's Dodge Chry, Jeep (254) 773-4556		No: Cylinders		
Original Owner	Dealer's City	State	Zip Code		
☒	Temple	TX	76504		
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
Auto	☒ Cruise Control	8 speed	Yes	09-JUN-2015	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 020000 SUSPENSION, 022000 SUSPENSION: REAR				Failure Mileage	Failure Speed
				1300	55
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					
<i>Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).</i>					
Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police	
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 2015 DODGE RAM 1500. WHILE DRIVING APPROXIMATELY 55 MPH OVER A DIP IN THE ROAD, THE REAR OF THE VEHICLE BEGAN TO SWAY TO THE RIGHT. THE FAILURE RECURRED EACH TIME THE VEHICLE STRUCK A BUMP IN THE ROAD. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 1,300. THE VIN WAS UNAVAILABLE.					
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.					