

CL-10758576-8147

Form Approved: O.M.B. No. 2127-0008

 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 22-AUG-2015		Repository ☐ Reference No. 10758576			
OWNER INFORMATION (Type or Print)									
Name				Daytime Telephone Number		E-mail Address			
Address									
City GOLDEN VALLEY		State AZ		Zip Code		Evening Telephone Number			
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 1D7HU16D74J				Make DODGE		Model RAM 1500			
						Model Year 2004			
Date Purchased		Dealer's Name and Telephone Number				Engine: No: Cylinders			
Original Owner ☐		Dealer's City		State		Zip Code			
Transmission Type		☐ Antilock Brakes ☐ Cruise Control		Powertrain		Multiple Failure:			
						Incident Date(s) 08-JAN-2015			
FAILED COMPONENT(S)/PART(S) INFORMATION									
Vehicle Component Code: 100000 POWER TRAIN						Failure Mileage			
						Failure Speed 75			
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).									
WE WERE ON OUR WAY BACK FROM CALIFORNIA TO ARIZONA ON THE 40. A SMALL HIGHWAY IN THE MIDDLE OF NO WHERE, WHEN WE HEARD A VERY LOUD BOOM. NEXT A VERY LARGE CLOUD OF SMOKE CAME FROM THE BACK OF THE TRUCK, THEN THE TRUCKS REAR END CEASED UP LEAVING US STRANDED IN THE MIDDLE OF NO WHERE AT NIGHT. TO HAVE THE TRUCK TOWED JUST TO NEEDLES CA WAS \$600.00. WAS THIS PART RECALLED? I CANNOT FIND THIS INFORMATION ANYWHERE AND WOULD LIKE TO KNOW WHAT CHRYSLER IS DOING ABOUT THIS VERY DANGEROUS SITUATION.									
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.									

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