

in response to defective airbag replacement info

sent to us

NO LONGER IN BUSINESS?

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------|------------------|
| <br>U.S. Department of Transportation<br>National Highway Traffic Safety Administration                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                           | <b>DOT Auto Safety Hotline</b><br><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 |                              | FOR AGENCY USE ONLY 100148                                       |                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                           | Date Received<br>14-FEB-2017                                                                                                                                                              |                              | Repository <input type="checkbox"/><br>Reference No.<br>10954490 |                  |
| OWNER INFORMATION (Type or Print)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                           |                                                                                                                                                                                           |                              | Daytime Telephone Number<br>[REDACTED]                           |                  |
| Name [REDACTED]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                           |                                                                                                                                                                                           |                              | E-mail Address                                                   |                  |
| Address [REDACTED]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                           |                                                                                                                                                                                           |                              | Evening Telephone Number                                         |                  |
| City GREER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           | State SC                                                                                                                                                                                  | Zip Code [REDACTED]          |                                                                  |                  |
| <small>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, 49 FR 53971 (Sep. 3, 2004).</small>                                                                                                                                                                                                                                                                    |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| <b>VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| 17 digit VIN Number Located at bottom of windshield on driver's side<br>1D7HU16L35 [REDACTED]                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                           | Make<br>DODGE                                                                                                                                                                             | Model<br>RAM 1500            | Year<br>2003                                                     |                  |
| Date Purchased<br>2003                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Dealer's Name and Telephone Number<br>STREET'S CARS DODGE |                                                                                                                                                                                           | Engine: 5.7<br>No: Cylinders | Fuel Type:                                                       |                  |
| Original Owner<br><input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Dealer's City<br>OAK HILL WV                              |                                                                                                                                                                                           | State<br>WV                  | Zip Code<br>26049                                                |                  |
| Transmission Type<br><input type="checkbox"/> Antilock Brakes<br><input type="checkbox"/> Cruise Control                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Powertrain                                                |                                                                                                                                                                                           | Multiple Failure:            | Incident Date(s)<br>26-MAY-2015                                  |                  |
| <b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| Vehicle Component Code: 140000 AIR BAGS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                           |                                                                                                                                                                                           |                              | Failure Mileage                                                  | Failure Speed    |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| 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:                                               |                  |
| <b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| Make:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                           | Date Manufactured:                                                                                                                                                                        |                              | Model No./Name:                                                  |                  |
| Seat Type:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           | Installation System:                                                                                                                                                                      |                              |                                                                  |                  |
| Child Seat Component Code:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                           | Failed Part:                                                                                                                                                                              |                              |                                                                  |                  |
| <b>APPLICABLE INCIDENT INFORMATION</b><br><small>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| 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                                        | Number of Deaths |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                           |                                                                                                                                                                                           |                              | Reported to Police<br>N                                          |                  |
| Narrative Description of Incident(S), Crash(es), and Injury(ies).<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).                                                                                                                                                                                                                                                                                                                     |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| TL* TAKATA RECALL. THE CONTACT OWNS A 2003 DODGE RAM 1500. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 15V312000 (AIR BAGS); HOWEVER, THE PART TO DO THE REPAIR WAS UNAVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE. VIN TOOL CONFIRMS PARTS NOT AVAILABLE.                                                                                                                                                           |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |
| <small>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.</small> |                                                           |                                                                                                                                                                                           |                              |                                                                  |                  |

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