 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 13-MAR-2017 JUN - 6 2017		Repository <input type="checkbox"/> Reference No. 10960395			
OWNER INFORMATION (Type or Print)						Daytime Telephone Number [REDACTED]		E-mail Address	
Name [REDACTED]						Evening Telephone Number			
Address [REDACTED]									
City PAVARES		State FL		Zip Code [REDACTED]					
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 1FADP5AU9D[REDACTED]				Make RAM		Model PROMASTER CITY		Model Year 2016	
Date Purchased		Dealer's Name and Telephone Number				Engine: No: Cylinders		Fuel Type:	
Original Owner <input type="checkbox"/>		Dealer's City		State	Zip Code				
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain		Multiple Failure:		Incident Date(s) 13-MAR-2017			
<input type="checkbox"/> Cruise Control									
FAILED COMPONENT(S)/PART(S) INFORMATION									
Vehicle Component Code: 110000 ELECTRICAL SYSTEM						Failure Mileage 8200		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 <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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured		Number of Deaths		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).									
TL* THE CONTACT OWNS A 2016 RAM PROMASTER CITY. WHILE DRIVING VARIOUS SPEEDS, THE SPEEDOMETER WAS NOT ILLUMINATED PROPERLY AND COULD NOT BE READ BY THE CONTACT. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 8,200.									
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.									

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

When driving in different directions of sunlight, the left side of speedometer goes dark and disappears. I was going too fast in a school zone and too slow on highway. Very dangerous! Also, it takes a long time looking off the road when I'm trying so hard to see my speed. I have good eyesight.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation
National Highway Traffic Safety Administration
1200 New Jersey Avenue SE
Washington, D.C. 20077-9382
Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES


BUSINESS REPLY MAIL
FIRST CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382




Think your vehicle has a safety defect?



If so:
Use the enclosed form to file a report.

or visit:
www.safercar.gov

or call:
Vehicle Safety Hotline
888-327-4236



Vehicle Owners' Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

