

OF INFORMATION ACT (FOIA), 5 U.S.C.552(B)(6)

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW: Complaint
Date: Tuesday, June 22, 2021 10:10:30 AM
Attachments: [REDACTED]

From: [REDACTED]
Sent: Tuesday, June 22, 2021 9:07 AM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject: Complaint

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U.S. Department
of TransportationNational 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

19-MAY-2021

Repository ☐Reference No.
11417747**OWNER INFORMATION (Type or Print)**

Name XXXXXXXXXX		
Address XXXXXXXXXX		
City NORTONVILLE	State KY	ZIP Code XXXXXX

Daytime Telephone Number
XXXXXXXXXXE-mail Address
XXXXXXXXXX

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 1D3HU18D94J XXXXXX		MAKE DODGE	Model RAM 1500	Model Year 2004
Date Purchased	Dealer's Name and Telephone Number BMW of Freehold 732) 298-9		Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City Freehold	STATE NJ	ZIP Code 07728	
Transmission Type	☐ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s) 11-MAY-2021
	☐ Cruise Control			

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Components Codes: 100000 POWER TRAIN	Failure Mileage 160000.0	Failure Speed
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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)	☐ Original Requirement ☐ 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), Injury(ies).)

Crash ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured	Number of Deaths	Reported to Po ice N
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Narrative Description of Incident(s), Crash(es), 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).

THE CONTACT OWNS A 2004 DODGE RAM 1500. THE CONTACT STATED THAT UPON LOOKING UNDERNEATH THE VEHICLE, THE CONTACT NOTICED THAT THERE WAS A CRACK IN THE MIDDLE OF THE TRANSMISSION. THE CONTACT STATED NO WARNING LIGHT WAS ILLUMINATED. THE VEHICLE WAS NOT TAKEN TO A LOCAL DEALER OR INDEPENDENT MECHANIC TO BE DIAGNOSED. THE VEHICLE HAD NOT BEEN REPAIRED. THE CONTACT WAS RELATING THIS ISSUE TO AN UNKNOWN RECALL. THE MANUFACTURER HAD NOT BEEN INFORMED OF THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 160,000

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.