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

Date Received: POSTED RECEIVED 00 NOV 15 PM 1:11 OFFICE DEFECTS INVE

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Reference No.: 557334

QC'd

OWNER INFORMATION (Type or Print)

[redacted]

Daytime Telephone Num: ( )

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of O[redacted] Date 11/2/00

VEHICLE INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) *(Located at bottom of windshield on driver's side)*	Make	Model	Year
3B7HC13Y9XG247430	Dodge	P/U 1500	1999

Purchased Date	Dealer's Name	Engine Size (CID/CC/L)	
Aug-1999 ☐ New ☐ Used	Maxwell Dodge	318	☐ Turbo ☐ Diesel ☑ Gas
Dealer's City	**State**	**Zip Code**	**No. Cylinders**
Taylor	Texas	?	8 ☐ Fuel Injection

Manufacture Date (on driver's door or pillar)	Transmission Type	Restraint System	Cruise Control	Drivetrain	Vehicle Type	Body Style
7/99	☐ Manual ☑ Automatic	☑ Driverside Air Bag ☐ Motorbelt ☑ Passengerside Air Bag ☐ 2-Point Belt ☑ 3-Point Belt	☑ Yes ☐ No	☐ Front ☑ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utility ☐ Van ☑ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☑ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

	Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
		☐ Left ☑ Right ☐ Front ☑ Rear	☑ Original ☐ Replacement	☐ Yes ☑ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name	Complete Tire Size
Michelin	LTX A/S	P245/75R16

No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
1	Mileage at Failure(s): 16,000 Vehicle Speed at Failure(s): 70mph	☐ Yes ☑ No	☑ Yes ☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
☐ Yes ☑ No	☐ Yes ☑ No			☑ Yes ☐ No

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

While Driving Home From Trip To New Mexico, Tire Immediately went Flat. There was no Road Hazard I observed. No sound of Blowout. Road had no Shoulder To move off Highway for about 2-3 Tenths of mile.

Continue on back.

Mail postage free or fax to 202-366-7882