Form Approved: OMB No. 2127-0042

U.S. Department of Transportation
National Highway Traffic Safety Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: http://www.nhtsa.dot.gov

FOR AGENCY USE ONLY 258

Date Received: 27-FEB-2001

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 741596

[redacted]

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

Signature of Owner _____ **Date**____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1B3ES42CXWD708323	DODGE	NEON	1998	

Purchase Dat: 01-OCT-2099 ☐ New ☒ Used

Dealer's Name_____ City_____ State_____ Zip Code_____

Engine Size (CID/CC/L 2.2 No Cylinders _____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☒ 2-Point Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☒ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other_____	☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
06300000	FUEL:FUEL INJECTION SYSTEM	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Mileage at Failure(s)	Failed Part(s)	NHTSA Previously
2	02-NOV-2099 29000	65	☐ Yes ☐ No	☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE FIRST TIME WOULD HAVE BEEN HEADED UP 23 N THE CAR HESITATED ON THE HILL, LATER THAT DAY, BEING THE NEXT DAY AFTER I BOUGHT THE CAR, IT STOPPED GOING UP A SLIGHT INCLINE ON HIGH STREET IN WORTHINGTON OH IN LUNCH HOUR TRAFFIC, I WAS IN THE FAR LANE AND COULD FEEL THERE WAS NO PRESSURE ON THE GAS PEDAL, THE NEXT WAS 2 DAYS LATER GOING UP KENNEY RD, I WAS HALF WAY WHEN I COULD FEEL NO PRESSURE IN THE GAS PEDAL, I MANAGED TO GET OFF THE ROAD AND TURN THE CORNER WHEN THE CAR STOPPED, THE FINAL TIME I WAS ON MY WAY TO WORK IN MORNING RUSH WHEN IT STARTED TO ACT UP, AGAIN THERE WAS NO PRESSURE IN THE GAS PEDAL, I WAS MOVING AT A RATE THAT I COULD PULL OFF THE ROAD, EACH TIME EVEN THOUGH I WAS ON LEVEL GROUND THE CAR WOULD NOT START AGAIN, THE FIRST TIME THE DEALER SAID I WAS OUT OF GAS, THE

CONTINUED ON REVERSE