



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

17-SEP-2001

Ord. or  
rt. dt  
od. rt  
rp. ltr

Reference No.

752296

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) <small>(Locate at bottom of instrument cluster)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1B4HS28Z3WF149257	DODGE TRUCK	DURANGO	1998			
Purchase Date 01-OCT-1999	Dealer's Name _____	Engine Size (CID/CC/L) 5.9L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injectio			
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____				
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Component 01120000 03273000 07457010	Part Name(s) STEERING:COLUMN BRAKES:HYDRAULIC:DISC:ROTOR:DISC HUB POWER TRAIN:DRIVELINE:DIFFERENTIAL:RING AND PINION GEAR	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure 1	Date(s) of Failure(s) 24-NOV-1999 30300 Mileage at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---	---------------------------	----------------------	--------------------------	---

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

THIS VEHICLE HAS HAD MAJOR COMPONENT BREAKDOWNS SINCE PURCHASE. INITIALLY, IMMEDIATELY AFTER PURCHASE THERE WAS A CLICKING SOUND IN THE STEERING COLUMN. THE DEALER INDICATED THAT THERE WAS A TSB AND REPLACED STEERING COLUMN. THE SECOND PROBLEM OCCURRED IN FEBRUARY 2000, SOME THREE MONTHS AFTER PURCHASE. WE BEGAN TO NOTICE A SIGNIFICANT PULSING IN THE BRAKE PEDAL. THE DEALER ATTRIBUTED THIS TO ABS BRAKES. SEVERAL MONTHS LATER WHEN THE PULSING WAS SIGNIFICANTLY GREATER AND THE BRAKING WAS BEING AFFECTED, AN INDEPENDENT SHOP REVIEWED THE BRAKES AND INDICATED THAT THE ROTORS WERE SEVERELY WARPED AND CAUSING THE PULSING SENSATION. THIS WAS REPAIRED OUT OF POCKET. IN FEBRUARY, 2001 THE TEMPERATURE BEGAN FLUCTUATING, SPIKING HIGHER TEMPERATURES CAUSING THE CHECK (

CONFIDENTIAL - KEEP HERE

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 to 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.