



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

26-FEB-2002

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

758677

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) (Location at bottom of and/or driver's door side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3B7HF12Z3XG194032	DODGE TRUCK	RAM 1500	2001	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____	
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
		Drive Train ☐ Front ☐ Rear ☒ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____
			Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12111000	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT.	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 1	Date(s) of Failure(s) 30-NOV-2001 Mileage at Failure(s) 27890 Vehicle Speed at Failure(s) 25	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 ☐ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 1	Number of Fatalities	Estimated Property Damag	Reported to Police ☒ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THIS TRUCK IS OWNED BY SACRAMENTO COUNTY. OUR DRIVER PROCEEDED FROM A GREEN LIGHT INTO THE INTERSECTION. ANOTHER CAR TRAVELLING PERPENDICULAR TO OURS RAN THEIR RED LIGHT. OUR TRUCK IMPACTED ABOUT AT THE PASSENGER SIDE DOOR. WE "T-BONED" THE OTHER CAR. DURING THIS ACCIDENT THE CAR TRAVELLING BESIDE OURS COLLIDED WITH THE SIDE OF OUR TRUCK. TWO HIGHWAY PATROL OFFICERS ACTUALLY WITNESSED THE ACCIDENT. THEY ESTIMATED THE SPEED OF COLLISION FOR OUR TRUCK AT OVER 25 MPH. THE AIRBAGS IN BOTH OF THE OTHER VEHICLES DEPLOYED. WE DID ALERT DODGE TO THIS EVENT. THEY CHECKED THE ELECTRONIC SYSTEM AND FOUND NO FAULTS. WE ARE STILL CONCERNED BECAUSE A SHORT TIME LATER WE HAD ANOTHER FROM

CONTINUE ON REVERSE

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.