



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 758

Date Received

08-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8001779

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 windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1B7GL22X915292894		DODGE TRUCK	DAKOTA	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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ 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 07300000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 02-JAN-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) 17000		
	Vehicle Speed at Failure(s)		

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	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE ON A LONG TRIP TRANSMISSION STARTED SLIPPING, VEHICLE AT DEALERSHIP AT THIS TIME.
PLEASE PROVIDE ADDITIONAL INFORMATION. *AK

COPIES OF THIS FORM ARE:

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.

 U.S. Department of Transportation National Highway Traffic Safety Administration Vehicle Owner's Questionnaire (VOQ) DOT Auto Safety Hotline 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY Date Received <u>1/18/02</u> File # <u>100-1002</u> Reference No. <u>8001779</u> Motor Number <u>732505</u> Home # <u>[REDACTED]</u>	
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 <u>[REDACTED]</u> Date <u>01/21/02</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Looked at column 12) <u>1B7GL22X915292894</u>		Vehicle Make <u>DODGE TRUCK</u>	
Vehicle Model <u>DAKOTA</u>		Vehicle Year <u>2001</u>	
Current Odometer Reading <u>18,600</u>		Engine Size (CID/CC/L) <u>3.9L</u>	
Fuel Type ☒ Gas ☐ Diesel ☐ Turbo		No Cylinders <u>6</u>	
Transmission Type ☒ Automatic ☐ Manual		Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other	
Restraint System ☒ 3-Point Belt ☐ 2-Point Belt ☐ Motorbelt		Drive Train ☒ Front ☐ Rear ☐ 4 Wheel	
Antilock Brakes ☒ Yes ☐ No		Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>07300000</u>		Part Name(s) <u>POWER TRAIN/TRANSMISSION/AUTOMATIC</u>	
Location ☐ Front ☐ Left ☐ Right ☐ Rear		Failed Parts ☒ Original ☐ Replacement	
No of Failures <u>2</u>		Date(s) of Failure(s) <u>02-JAN-2002</u>	
Mileage at Failure(s) <u>17000</u>		Vehicle Speed at Failure(s) <u>70 MPH</u>	
Failed (Parts) ☒ Yes ☐ No		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 <u>0</u>		Number of Fatalities <u>0</u>	
Estimated Property Damage <u>0</u>		Reported to Police ☐ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) WHILE ON A LONG TRIP TRANSMISSION STARTED SLIPPING, VEHICLE AT DEALERSHIP AT THIS TIME. PLEASE PROVIDE ADDITIONAL INFORMATION. *AK → Dodge rebuilt the transmission under warranty and while test driving, it failed again. C + D Dodge of Marquette Ohio then rebuilt it AGAIN. → TRANSMISSION FAILURE IN THE CONVERTER. CRASH AND FIRE REVERSE SEAL. over 2			

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CONTINUE ON BACK IF NEEDED

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

→ THE TRUCK STILL SHIFTS IMPROPERLY. UPON RETURNING TO
FLORIDA, I TOOK IT BACK TO SPEEDWAY DODGE IN DAYTONA BEACH.
THEY CHECKED IT AND SAID EVERYTHING IS IN SPECIFICATION.
→ THEY TRUCK IS SEVEN MONTHS OLD.

☆ U.S.G.P.O.: 1982-023-897 / 02385

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400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



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POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

