



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 §20

Date Received

30-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8003170

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) (Locate at bottom of windshield or door side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
FILL IN PLEASE	DODGE	INTREPID	1997	
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
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type	Body Style			
☐ Car ☐ Van ☐ Minivan ☐ Other	☐ Sport Util ☐ Truck ☐ Motorcycle ☐ Other		☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06300000	Part Name(s) FUEL:FUEL INJECTION SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 1	Dates of Failure(s) 10-JAN-2002 Mileage at Failure(s) 68500 Vehicle Speed at Failure(s)	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 0	Number of Fatalities 0	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

DEALERSHIP SERVICED VEHICLE FOR RECALL CAMPAIGN 98V184000 ON 10-JAN-2002. AFTER VEHICLE WAS SERVICED FOR RECALL AND RETURNED TO THE CONSUMER, FUEL STARTED LEAKING FROM THREE FUEL INJECTORS AND COVERED ENGINE COMPARTMENT IN GASOLINE. DEALERSHIP DIAGNOSED PROBLEM, AND MADE ALL NECESSARY REPAIRS. PLEASE PROVIDE ANY ADDITIONAL INFORMATION / DOCUMENTATION.*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.