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** 436

Date Received: 12-MAR-2002

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

Reference No.: 8005434

[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.) (Locate at bottom of windshield on driver's side) | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Readin |
|---|---|---|---|---|
| 1B7MC33D5WJ122588 | DODGE TRUCK | RAM | 1998 | |

| Purchase Dat | | Engine Size | |
|---|---|---|---|
| ☐ New ☒ Used | Dealer's Name_____ City_____ State_____ Zip Code_____ | (CID/CC/L ____ 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) |
|---|---|---|---|
| 03250000<br>12110000 | **BRAKES:HYDRAULIC:ANTI-SKID SYSTEM**<br>**INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG** | ☐ Left ☐ Right ☐ Front ☐ Rear | ☐ Original ☐ Replacement |

| No of Failure | Dates of Failure(s) | Failed Part(s) | NHTSA Previously |
|---|---|---|---|
| | 01-JUL-2001 | ☐ Yes ☐ No | ☐ Yes ☐ No |
| | Mileage at Failure(s) 71 | | |
| | 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 | Fire | Number of Persons Injured | Number of Fatalitie | Estimated Property Damag | Reported to Polic |
|---|---|---|---|---|---|
| ☐ Yes ☐ No | ☐ Yes ☐ No | | | | ☐ Yes ☐ No |

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

**ABS LIGHT STAYS ILLUMINATED WHEN DRIVING. DEALER HAS REPLACED CLOCKSPRING. PLEASE PROVIDE ADDITIONAL INFORMATION.*AK**

CONTINUED ATTACHMENT

Form Approved: O M.B. No. 2127-0008

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

DOT Auto Safety Hotline

# Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

**FOR AGENCY USE ONLY** 436

Date Received: RECEI 12-MAR-2002 OFFIC DEFECTS INVESTIGATION

Qd_or / rt_dt / od_rt / up_ltr

Reference No. 8005434

**OWNER INFORMATION (Type or Print)**

[redacted] 742925

[redacted]

ARLINGTON TX [redacted]

Work Number [redacted]

Home Number Same

*Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?* ☒ YES ☐ NO
*In the absence of an [redacted] provide your name and address to the vehicle manufacturer.*

Signature of Owner [redacted] Date 8/15/2002

**VEHICLE INFORMATION**

| Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) | Vehicle Mak | Vehicle Mode | Vehicle Year | Current Odometer Readin |
|---|---|---|---|---|
| 1B7MC33D5WJ122588 | DODGE TRUCK | RAM | 1998 | 74,000 |

Purchase Date
☐ New ☒ Used

Dealer's Name
City State Zip Code

Engine Siz 5.9L
(CID/CC/L 360
No Cylinders 6

☒ Turbo
☒ Diesel
☐ Gas
☐ Fuel Injectio

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

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

| Component | Part Name(s) | Location | Failed Part(s) |
|---|---|---|---|
| 03250000<br>12110000 | BRAKES:HYDRAULIC:ANTI-SKID SYSTEM<br>INTERIOR SYSTEMS:PASSIVE RESTRAINT:AIR BAG | ☐ Left ☐ Right<br>☐ Front ☐ Rear | ☒ Original<br>☐ Replacement |

No of Failures

Date(s) of Failure(s) 01-JUL-2001
Mileage at Failure(s) 71,000
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 | Fire | Number of Persons Injured | Number of Fatalities | Estimated Property Damage | Reported to Police |
|---|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | Ø | Ø | Ø | ☐ Yes ☒ No |

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

**ABS LIGHT STAYS ILLUMINATED WHEN DRIVING. DEALER HAS REPLACED CLOCKSPRING. PLEASE PROVIDE ADDITIONAL INFORMATION.*AK**

Airbag Clockspring mechanism failed in identical fashion as with recalled Dodge trucks. This VIN was not included in the recall. It should be included in the recall.

CONTINUE ON BACK IF NEEDED

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 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.