



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 798

Date Received

19-JUN-2002

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

8012149

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
N/A	DODGE TRUCK	RAM	1997			
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No Cylinders _____				
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<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	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<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 _____	<input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03200000	Part Name(s) BRAKES:HYDRAULIC SYSTEM	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	Dates of Failure(s) 02-JAN-2002 Mileage at Failure(s) 30000 Vehicle Speed 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 type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN APPLYING BRAKES, ONLY HALF OF BRAKES WERE APPYING PRESSURE TO ROTORS.
CONTACTED DEALER. *AK

CONTINUED 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.

repaired my self - Ridsx in casting keeps caliper from floating freely so there is only pressure on the piston side of the caliper

WHEN APPLYING BRAKES, ONLY HALF OF BRAKES WERE APPLYING PRESSURE TO ROTORS. CONTACTED DEALER. OK

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

Crash	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	File	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Number of Persons Injured	---	Number of Vehicles Involved	---	Estimated Property Damage	---	Reported to Police	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

APPLICATION INCIDENT INFORMATION

No of Failures	02-JAN-2002	Mileage at Failure(s)	30000	Vehicle Speed at Failure(s)	---	Failed Parts	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Previously	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component	03200000	Part Name(s)	BRAKES:HYDRAULIC SYSTEM	Location	<input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Parts	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
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Transmission Type	Automatic <input checked="" type="checkbox"/> Manual <input type="checkbox"/>	Antilock Brakes	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Restraint System	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passenger-side Airbag	Vehicle Type	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	Body Style	<input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck
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Purchase Date	3/97	Dealers Name	Antilock Dodge	City	Ashtabuck	State	IL	Zip Code	---
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Vehicle Ident. No. (VIN)	NIA 3B7HF13Y2V6759800	Vehicle Make	DODGE TRUCK	Vehicle Model	RAM	Vehicle Year	1997	Current Odometer Reading	37077
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Engine Size	5.2L	Engine Type	Gas	No Cylinders	8	Fuel Injectio	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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U.S. Department of Transportation	NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION	1-888-DASH-2-DOT	1-888-327-4236	www.nhtsa.dot.gov/hotline
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DOT Auto Safety Hotline	Vehicle Owner's Questionnaire (VOQ)	759890	Home No. [Redacted]	Work Number [Redacted]
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CONTINUE ON BACK IF NEEDED