



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

26-JUN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8012673

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 and door frame)		Vehicle Make DODGE	Vehicle Model INTREPID	Vehicle Year 1995	Current Odometer Reading _____
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 05100000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 02-JUN-2002	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
	Mileage at Failure(s) 34000		
	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)

VEHICLE WILL INTREMITTENTLY STALL OUT WHILE CONSUMER IS DRIVING VEHICLE. WILL HAPPEN AT ANY SPEED. CONTACTED DEALER, AND THE DEALER IS NOT WILLING TO DO ANYTHING.*AK

COPIES OF REPORTS - FREE -

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.

DOT Auto Safety Hotline		FOR AGENCY USE ONLY 798	
U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print)		Date Received <u>26-JUN-2002</u> Office of Defects Investigation Reference No. <u>8012673</u> Work Number _____ Home Number _____	
[Redacted Address]		[Redacted] 761077	
RICHMOND VA [Redacted]		Date <u>7/18/02</u>	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of [Redacted] name and address to the vehicle manufacturer.			
Signature of Owner _____ Date <u>7/18/02</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
<u>2B3HD56PX SH572550</u>	<u>DODGE</u>	<u>INTREPID</u>	<u>1995</u>
Purchase Date <u>MAR. 1995</u>	Dealer's Name <u>PENCE CHRYSLER DODGE</u>		Engine Size (CID/CC/L) <u>3.5</u>
☒ New ☐ Used	City <u>ASHLAND</u> State <u>VA</u> Zip Code <u>22805</u>	No. Cylinders <u>6</u>	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection
Transmission Type	Antilock Brakes	Restraint System	Cruise Control
☐ Manual ☒ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No
Vehicle Type	Body Style	Drive Train	Engine Type
☒ Car ☐ Van ☐ Minivan ☐ Other	☐ Sport Utl ☐ Truck ☐ Motorcycle	☒ Front ☐ Rear ☐ 4-Wheel	☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>05100000</u>	Part Name(s) <u>ENGINE</u>	Location	Failed Part(s)
		☐ Left ☐ Front ☐ Right ☒ Rear	☒ Original ☐ Replacement
No. of Failures <u>5</u>	Date(s) of Failure(s) <u>02-JUN-2002 5/05 8/05 7/00 7/02</u> Mileage at Failure(s) <u>34000 3000 20000 25000 30000</u> Vehicle Speed at Failure(s) <u>2070 25</u>	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
☐ Yes ☒ No	☐ Yes ☒ No	<u>0</u>	<u>0</u>
Estimated Property Damage		Reported to Police	
<u>0</u>		☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
VEHICLE WILL INTREMITTENTLY STALL OUT WHILE CONSUMER IS DRIVING VEHICLE. WILL HAPPEN AT ANY SPEED. CONTACTED DEALER, AND THE DEALER IS NOT WILLING TO DO ANYTHING.*AK THE SERVICE MANAGER AT PENCE THOUGHT THAT IT MIGHT BE A FAULTY FUEL PUMP. TWO MECHANICS ON THE ROAD THOUGHT IT MIGHT BE A CLOGGED FUEL INJECTION PROBLEM IF THIS SHOULD HAPPEN AT HIGH SPEED ON AN INTER-STATE HIGHWAY IT COULD BE FATAL.			
CONTINUE ON BACK IF NEEDED			
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