

U.S. Department
of TransportationNational 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 118

Date Received

07-NOV-2000

Oid_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

874619

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>(Listed at front of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3B3ES47C5TT23769	DODGE	NEON	1996	

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 Injection
<input type="checkbox"/> New <input checked="" 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 checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____	<input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12430000	Part Name(s) INTERIOR SYSTEMS:INSTRUMENT PANEL:SPEEDOMETER:ODOMETER	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
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No. of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE SPEEDOMETER AND ODOMETER WORK INTERMITTENTLY. WHILE DRIVING ALONG ALL OF A SUDDEN THE NEEDLE WILL DROP TO ZERO AND ODMETER WILL STOP MOVING. DRIVER IS NOT ABLE TO TELL DRIVING SPEED AND CORRECT MILEAGE OF VEHICLE. IT COULD BE ANYWHERE FROM A FEW MINUTES UNTIL A FEW DAYS BEFORE THEY START WORKING AGAIN. THIS HAS BEEN AN ON GOING PROBLEM FOR THE LAST MONTH. THE PROBLEM HAS NOT BEEN REPORTED TO THE DEALERSHIP.

CONTINUED ON BACK (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.



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FOR AGENCY USE ONLY 118

Date Received: 11-29-2000 4:55 PM
07-NOV-2000
OFFICE DEFECTS INVESTIGATION

Od_or _____
Yr_m _____
od_rt _____
up_Mr _____

Reference No. 874619

OWNER INFORMATION (Type or Print)

[Redacted] 654369

Work Number _____
Home Number _____

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an address and address to the vehicle manufacturer.
Signature of Owner [Redacted] Date 11/29/2000

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 3B3ES47C5TT23769
Vehicle Make DODGE
Vehicle Model NEON
Vehicle Year 1996
Current Odometer Reading 66,682

Purchase Date _____ Dealer's Name Fred's Autos
City Fargo State ND Zip Code 58102
 New Used
Engine Size (CID/CC/L) _____ No Cylinders 4
 Turbo Diesel Gas Fuel Injection

Transmission Type Manual Automatic
Antilock Brakes Yes No
Restraint System 3-Point Belt Motorbelt
 Driverside Airbag 2-Point Belt
 Passengerside Airbag
Cruise Control Yes No
Drive Train Front Rear 4-Wheel
Vehicle Type Car Sport Util Truck Minivan Motorcycle Other
Body Style 2-Door 4-Door Stationwagon Pick Up Truck Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12430000 Part Name(s) INTERIOR SYSTEMS: INSTRUMENT PANEL: SPEEDOMETER: ODOM Location Left Right Front Rear Failed Part(s) Original Replacement

No of Failures 8 also Date(s) of Failure(s) Oct 13 - Mileage at Failure(s) 35 55 60 when noticed Vehicle Speed at Failure(s) 25 55 60 4 11 Failed Part(s) Available? Yes No NHTSA Previously Contacted? 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 _____ Number of Fatalities _____ Estimated Property Damage _____ Reported to Police Yes No

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CONTINUE ON BACK IF NEEDED

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