 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>	<p>DOT Auto Safety Hotline</p> <p>Vehicle Owner's Questionnaire (VOQ)</p> <p>NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 284</p>	
	<p>Date Received</p> <p>09-JAN-2001</p>		<p>Od_or _____ rt_dt _____ od_rt _____ up_llr _____</p>	
<p>OWNER INFORMATION (Type or Print)</p>			<p>Reference No.</p> <p>877719</p>	
<p>[Redacted]</p>			<p>665610</p>	
<p>Work Number [Redacted]</p>			<p>Home Number</p>	

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.) (Located at bottom of windshield on driver's side)	Vehicle Mak	Vehicle Model	Vehicle Year	Current Odometer Reading		
337533D3VM510338	DODGE TRUCK	RAM	1997			
Purchase Date	Dealer's Name	Engine Siz (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 checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Bel	<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 Util Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
06114000	FUEL:FUEL TANK ASSEMBLY:GAUGE:FUEL	<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
	Mileage at Failure(s) 84	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

FUEL GUAGE WAS INOPERABLE AND MISREAD AMOUNT OF FUEL IN VEHICLE. DEALER HAS BEEN NOTIFIED. *AK

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 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 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 284 Date Received RECEIVED 09 JAN 2001 OFFICE INVESTIGATION		Od. or rt. dt od. rt up. ltr	
OWNER INFORMATION (Type or Print) [Redacted]				665610		Reference No. 877719	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an [Redacted] your name and address to the vehicle manufacturer.				<input type="checkbox"/> YES		<input type="checkbox"/> NO	
Signature of Owner [Redacted]				Date <u>1/30/01</u>			
VEHICLE INFORMATION							
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 337533D3VM510338		Vehicle Make DODGE TRUCK		Vehicle Model RAM		Vehicle Year 1997	
						Current Odometer Reading 85350	
Purchase Date 9/22/96		Dealer's Name PRESCOTT BRO. INC. CHRYSLER		Engine Size (CID/CYL) 5.9-6		<input type="checkbox"/> Turbo <input checked="" type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used		City MINNOTA State IL Zip Code 61342		No Cylinders 6			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic		Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag		Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Drive Train <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel		Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport UV <input type="checkbox"/> Van <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	
						Body Style <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 08114000		Part Name(s) FUEL:FUEL TANK ASSEMBLY:GAUGE:FUEL		Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear		Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	
No of Failures 1		Date(s) of Failure(s) Mileage at Failure(s) 45,000 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 checked="" 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 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	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)							
FUEL GAUGE WAS INOPERABLE AND MISREAD AMOUNT OF FUEL IN VEHICLE. DEALER HAS BEEN NOTIFIED. *AK							
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.							



February 6, 2001

U. S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

Dear Sirs:

Thank you for sending the Vehicle Owner's Questionnaire.

The fuel gauge on my 1997 Dodge failed at 45,000 miles. I took it to the dealer where it was purchased. They checked it and said everything from the tank forward was OK and that a new meter was needed. They installed a new fuel gauge and it still didn't work. I was told that they would have to drop the tank and I would have to pay for that. I had already paid almost \$300 and it wasn't working.

In an unrelated matter, I had 5 Cooper tires (225/75R16) with tread separation from the carcass. The tires were original equipment on a 31 ft. 5th wheel travel trailer with dry weight of 10,410 lb. with less than 10,000 miles. The last dot digit was a 6.

Sincerely,

A handwritten signature in cursive script is written over a large black rectangular redaction box.