

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 117	
OWNER INFORMATION (Type or Print) 667896		Data Received 18-JAN-2001	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
		Reference No. 878479	
Signature of Owner _____		Work Number _____ Home Number _____	Date ____/____/____
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) 1B7HC13Z9YJ110075	Vehicle Make DODGE TRUCK	Vehicle Model 1500	Vehicle Year 2000
Current Odometer Reading _____			
Purchase Date _____ ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Siz (CID/CC/L) _____ No Cylinders _____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
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	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 12111000	Part Name(s) INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 1	Date(s) of Failure(s) 30-NOV-2000 Mileage at Failure(s) 39 Vehicle Speed at Failure(s) 35	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 ☒ Yes ☐ No	Fire ☐ Yes ☒ No	Number of Persons Injured 1	Number of Fatalities 0
Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING 35MPH ANOTHER VEHICLE WAS MAKING A TURN AND WAS "T" BONED BY TRUCK. NEITHER AIR BAG DEPLOYED UPON IMPACT. DRIVER HAD SEAT BELT ON, BUT SUSTAINED FOLLOWING INJURIES, WHIPLASH/ HEAD HIT WINDOW AT CATACORNER POST, AND BACK PROBLEMS. *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.			

U.S. Department
of TransportationNational Highway
Traffic Safety
Administration

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

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Date Received

18-JAN-2001

 Od_or
 rt_dt
 od_rt
 up_ltr

Reference No.

876479

OWNER INFORMATION (Type or Print)

667896

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 authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer.

Signature of Owner

Date 1/29/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of
windshield on driver's side)

1B7HC13Z9YJ110075

Vehicle Make

DODGE TRUCK

Vehicle Model

1500

Vehicle Year

2000

Current Odometer Reading

37123

Purchase Date

10/14/00

Dealer's Name

Bixby Auto Ranch

Engine Size
(CID/CC/L)

1500

☐ Turbo
☐ Diesel
☒ Gas☐ Fuel Injection☒ New ☒ Used

City

Bixby

State

OK

Zip Code

74008

No Cylinders

8

Transmission Type

☐ Manual☒ Automatic

AntiLock Brakes

☐ Yes☒ No

Restraint System

☒ 3-Point Belt☒ Driverside Airbag☒ Passengerside Airbag☐ Motorbelt☐ 2-Point Belt

Cruise Control

☒ Yes☐ No

Drive Train

☐ Front☒ Rear☐ 4-Wheel

Vehicle Type

☐ Car☐ Van☐ Minivan☐ Other☐ Sport Utl☒ Truck☐ Motorcycle

Body Style

☐ 2-Door☒ 3-Door☐ Stationwagon☒ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
12111000

Part Name(s)

INTERIOR SYSTEMS: PASSENGER RESTRAINTS: AIR BAG: FRONT

Location

☐ Left☒ Front☐ Right☐ Rear

Failed Part(s)

☒ Original☐ Replacement

No. of Failures

1

Date(s) of Failure(s)

30-NOV-2000

Mileage at Failure(s)

39

Vehicle Speed at Failure(s)

35

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

1

Number of Fatalities

0

Estimated Property Damage

Totaled Truck

Reported to Police

☒ Yes☒ No

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

WHILE DRIVING 35MPH ANOTHER VEHICLE WAS MAKING A TURN AND WAS "T" BONED BY TRUCK. NEITHER AIR BAG DEPLOYED UPON IMPACT. DRIVER HAD SEAT BELT ON, BUT SUSTAINED FOLLOWING INJURIES, WHIPLASH/ HEAD HIT WINDOW AT CATACORNER POST, AND BACK PROBLEMS. *AK

Had to go to ER room, had staples placed. Still suffering. My frame was bent, nearly broken from

CONTINUE ON BACK IF NEEDED

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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

the hard impact. Put them in the middle of the front of truck. Investigator hired called us personally & told us my air bag should have deployed. I was injured because it did not.

Thank you

☆ U.S. G.P.O. 1987-625-887/8008

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

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300



NO POSTAGE
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IF MAILED
IN THE
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BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

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

