



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

12-FEB-2001

Od_or _____
rt_dt _____
pd_rt _____
ip_ltr _____

Reference No.

880332

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) 1B3EJ46X5TN108556	Vehicle Make DODGE	Vehicle Model STRATUS	Vehicle Year 1996	Current Odometer Reading
Purchase Date ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size _____ (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 Belt ☐ 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 05150024	Part Name(s) ENGINE:GASKETS:VALVE COVER	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) 28-JAN-2001 Mileage at Failure(s) 38 Vehicle Speed at Failure(s)	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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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS LEAKING OIL, AND CONSUMER TOOK VEHICLE TO AN INDEPENDENT MECHANIC.
MECHANIC STATED THAT HEAD GASKET WAS CRACKED. PROBLEM WAS REMEDIED BY MECHANIC.
*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.



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

DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT

1-888-327-4238

www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 798

Date Received

12-MAR-1 2001
12-FEB-2001

Od or
rt dt
od n
up kr

Reference No.

880332

OWNER INFORMATION (Type or Print)

674082

Work Nu

Home Nu

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 2/21/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) **B 1A3EJ46X5TN108556** Vehicle Make **DODGE** Vehicle Model **STRATUS** Vehicle Year **1996** Current Odometer Reading **38,600**

Purchase Date

Dealer's Name

From my mother's estate

Engine Size
(CID/GC/L

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

☒ New ☐ Used

City State Zip Code

No Cylinders

Transmission Type

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual☐ Yes☒ 3-Point Belt☐ Motorbelt☒ Yes☒ Front☐ Sport Utl☐ 2-Door☒ Automatic☒ No☒ Driverside Airbag☐ 2-Point Belt☐ No☐ Rear☐ Truck☒ 4-Door☒ Passengerside Airbag☐ 4-Wheel☐ Minivan☐ Motorcycle☐ Stationwagon☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component

06150021

Part Name(s)

ENGINE:GASKETS:VALVE COVER

Location

☐ Left
☐ Front

☐ Right
☐ Rear

Failed Part(s)

☒ Original
☐ Replacement

No of Failures

1

Date(s) of Failure(s) 25-JAN-2001

Mileage at Failure(s) 38,500

Vehicle Speed at Failure(s)

Failed Part(s)
Available?☒ Yes ☐ NoNHTSA 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

0

Number of Fatalities

0

Estimated Property Damage

0

Reported to Police

☐ Yes☒ No

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

VEHICLE WAS LEAKING OIL, AND CONSUMER TOOK VEHICLE TO AN INDEPENDENT MECHANIC. MECHANIC STATED THAT HEAD GASKET WAS CRACKED. PROBLEM WAS REMEDIED BY MECHANIC. *AK

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February 14, 2001

Daimler Chrysler Motors Corporation
P. O. Box 21-8004
Auburn Hills, MI 48321

COPY

RE: 828-83-08

On February 12, 2001, I placed a call to your customer service department in regards to my 1996 Dodge Stratus. I have had to spend considerable amount of money for a cracked engine head gasket as indicated on the original repair invoice for \$954.39. There is still some leakage under my car and when taken back today, they indicated that the transmission is now leaking.

In talking with your customer service representative, she indicated that I could expect a percentage of my repair costs to be reimbursed. It would be greatly appreciated as I am on a very tight budget and this added expense on a car with only 38,000 miles wasn't expected.

Please return the original repair order #3343. Thank you for your prompt attention to this matter.

Yours truly,


Enclosure

SIGN *Love & Whiskey*
MOLFRAN/TONES &
THANK YOU!
PLEASE COME AGAIN!

INDREIA Inc., One KOREA Way, Caldwell, ID 83805-8900 • CALL TOLL FREE 1-800-405-9281, TUE-THU. NO. FRN 1720