



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 117

Date Received

20-APR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

886407

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) (Location at bottom of windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
3B7MC33W8TM167878		DODGE TRUCK	3500	1996	
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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☒ No	☒ 3-Point Belt ☒ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Util ☐ Truck ☐ Motorcycle
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 01000000	Part Name(s) STEERING	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 11-NOV-1999 68 Mileage at Failure(s) _____	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	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WAS DRIVING VEHICLE AND STEERING FELT REAL LOOSE. VEHICLE WAS NOT CONTROLLABLE. WOULD DRIFT FROM SIDE TO SIDE. HEARD GRINDING NOISE WHEN TURNING STEERING WHEEL. EVERY TIME VEHICLE HIT A BUMP IT WOULD JERK EITHER LEFT OR RIGHT. FIRST TIME IT HAPPENED WAS REPAIRED. CURRENTLY, WOULD NEED REPAIRING FOR SAME PROBLEM.*AK

COPIES OF THIS FORM ARE:

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 17	
OWNER INFORMATION (Type or Print) 687684		Date Received 20-APR-2001		Od or ri di od rt up ltr	
				Reference No. 886407	
		Work Number 		Home Number 	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorized representative, please provide the name and address to the vehicle manufacturer.					
Signature of Owner <i>[Signature]</i>				Date <i>4/20/2001</i>	
VEHICLE INFORMATION					
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 3B7MC33W8TM167878		Vehicle Make DODGE TRUCK		Vehicle Model 3500	
		Vehicle Year 1996		Current Odometer Reading 68320	
Purchase Date 30 Apr 1996		Dealer's Name EARNHARDT DODGE		Engine Size (CID/CC/L)	
☒ New ☒ Used		City GILBERT		State AZ	
		Zip Code 85233		No Cylinders 10	
Transmission Type ☐ Manual ☒ Automatic		Anti-lock 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 ☐ Van ☐ Minivan ☐ Other		☐ Sport Jlt ☒ Truck ☐ Motorcycle	
				Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck ☐ Other	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Component 01000000		Part Name(s) STEERING REPLACED STEER GEAR		Location ☐ Left ☐ Right ☐ Front ☐ Rear	
				Failed Part(s) ☐ Original ☒ Replacement	
No of Failures 2		Date(s) of Failure(s) 11-NOV-1999		Mileage at Failure(s) 68	
		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 NONE	
				Number of Fatalities NONE	
				Estimated Property Damage : Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)					
WAS DRIVING VEHICLE AND STEERING FELT REAL LOOSE. VEHICLE WAS NOT CONTROLLABLE. WOULD DRIFT FROM SIDE TO SIDE. HEARD GRINDING NOISE WHEN TURNING STEERING WHEEL. EVERY TIME VEHICLE HIT A BUMP IT WOULD JERK EITHER LEFT OR RIGHT. FIRST TIME IT HAPPENED WAS REPAIRED. CURRENTLY, WOULD NEED REPAIRING FOR SAME PROBLEM. *AK AT 52 270 miles had STEERING GEAR REPLACED AT 68 076 miles had SAME STEERING GEAR REPLACED PART # 1-5211350DAF					
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.					