



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 436

Date Received

02-AUG-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

893290

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
2B7HB21Y3SK534527	DODGE TRUCK	RAM VAN	1995	
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 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 ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 11702000	Part Name(s) HEATER:UNKNOWN TYPE:DEFROSTER:DEFOGGER:MOTOR FAN	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 27-JUL-2001 62523 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 Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FAN MOTOR SWITCH STOPPED WORKING SEVERAL MONTHS AGO. BEHIND THE WHOLE UNIT SWITCH MELTED. INDEPENDENT MECHANIC PULLED UP A UNIVERSAL RECALL ON MAKE/ MODEL. PROBLEM WAS CAUSED BY INADEQUATE HEATING TO SWITCH. CONSUMER'S VEHICLE WAS NOT PART OF RECALL DUE TO VIN. *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 Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 436	
		Date Received: <u>Aug 27 PM 12:19</u> 02-AUG-2001 OFFICE DEFECT INVESTIGATION	
U.S. Department of Transportation National Highway Traffic Safety Administration		Od. or rt. di. _____ od. rt. _____ up. ltr. _____	
OWNER INFORMATION (Type or Print)		Reference No. 893290	
		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 agent, name and address to the vehicle manufacturer.			
Signature of Owner _____		Date <u>8/17/01</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (located at bottom of windshield on driver's side) 2B7HB21Y39K534527	Vehicle Make DODGE TRUCK	Vehicle Model RAM VAN	Vehicle Year 1995
			Current Odometer Reading 62555
Purchase Date <u>June 1995</u> ☒ New ☐ Used	Dealer's Name <u>Northfield Dodge</u> City <u>Grand Rapids Mich</u> Zip Code <u>49505</u>		Engine Size (CID/CC/L) <u>318</u> No. Cylinders <u>8</u> ☐ 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 Utl. ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____			
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 11702000	Part Name(s) HEATER:UNKNOWN TYPE:DEFROSTER:DEFOGGER:MOTOR FAN		Location ☐ Left ☐ Right ☒ Front ☐ Rear
			Failed Part(s) ☒ Original ☐ Replacement
No. of Failures 1	Date(s) of Failure(s) <u>27-JUL-2001</u> Mileage at Failure(s) <u>82523</u> 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
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
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CONTINUE ON BACK IF NEEDED

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THE FOLLOWING PAGES ARE WITHHELD TO
PROTECT UNWARRANTED INVASION OF
PERSONAL PRIVACY PURSUANT TO
EXEMPTION 6 OF THE FREEDOM OF
INFORMATION ACT, 5 U.S.C. 552(b)(6)

(Page 1 through Page 4)





