



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8393

DC METRO AREA (202) 368-0123

INTERNET: <http://www.nhtsa.dot.gov>

Use a No. 2 pencil or a blue
or black ink pen only.

CORRECT MARK: ●

FOR AGENCY USE ONLY

Date Received

3/14/01

Reference No.

Order _____

rcult _____

nd rt _____

ip tr _____

OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

NAME

STREET NO.

CITY

STATE

ENTER ZIP CODE

ZIP CODE - 4

AREA CODE

1 1 1 1 1 1 1 1 1 1

2 2 2 2 2 2 2 2 2 2

3 3 3 3 3 3 3 3 3 3

4 4 4 4 4 4 4 4 4 4

5 5 5 5 5 5 5 5 5 5

6 6 6 6 6 6 6 6 6 6

7 7 7 7 7 7 7 7 7 7

8 8 8 8 8 8 8 8 8 8

9 9 9 9 9 9 9 9 9 9

1 1 1 1 1 1 1 1 1 1

2 2 2 2 2 2 2 2 2 2

3 3 3 3 3 3 3 3 3 3

4 4 4 4 4 4 4 4 4 4

5 5 5 5 5 5 5 5 5 5

6 6 6 6 6 6 6 6 6 6

7 7 7 7 7 7 7 7 7 7

8 8 8 8 8 8 8 8 8 8

9 9 9 9 9 9 9 9 9 9

Do you authorize NHTSA to
provide a copy of this report to the
manufacturer of your vehicle?

☒ Yes
☐ No

Provide your name and address to the vehicle manufacturer

3/6/01

DATE

VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) (Located at bottom of windshield on driver's side)

2B7HB11YXWK138157

VEHICLE MAKE

Dodge

VEHICLE MODEL

Ram 1500

MANUFACTURE DATE

MODEL YEAR

1998

VEHICLE MANUFACTURER

☐ BMW ☐ Ford ☐ Honda ☐ Nissan ☐ Subaru ☐ Volvo ☐ Other _____
☒ DaimlerChrysler ☐ General Motors ☐ Hyundai ☐ Saab ☐ Toyota ☐ VW

PURCHASE DATE

☒ New
☐ Used

DEALER'S NAME

Dick Greenfield

CITY

Lawrenceville NJ

STATE

NJ

ZIP CODE

08648

ENGINE SIZE

SC/D/CC/D

NO. CYLINDERS

FUEL SYSTEM

☐ Turbo☒ Fuel Injection

FUEL TYPE

☐ Diesel☒ Gas

TRANSMISSION TYPE

☐ Manual☒ Automatic

ANTILOCK BRAKES

☒ Yes☐ No

RESTRAINT SYSTEM

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

CRUISE CONTROL

☒ Yes☐ No

DRIVETRAIN

☐ Front☒ Rear

VEHICLE TYPE

☐ Car☒ Van☐ Minivan☐ Sport Utility☐ Truck☐ Motorcycle☐ Other _____

DOORS

☐ 2-Door☒ 4-Door

BODY STYLE

☐ Hatchback☐ Pick Up Truck☐ Sedan☒ Stationwagon

FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT

- ☐ Child Seat
☐ Electrical Lights & Alarms
☐ Engine & Cooling System
☐ Equipment
☐ Fuel System, Exhaust
☐ Heater, Defrost, Ventilator
☐ Interior
☐ Parking Brake
☐ Power Train
☐ Service Brakes
☐ Steering
☐ Structure
☐ Suspension
☐ Visual Systems
☒ Other

Wheel Bearings

NO. OF FAILURES

3

0 1 2 3 4 5 6 7 8 9

0 1 2 3 4 5 6 7 8 9

INCIDENT DATE

1/28/99, 3/4/99, 5/7/99

MILEAGE AT INCIDENT

33213, 38009, 46788

VEHICLE SPEED AT INCIDENT

N/A

VEHICLE SPEED AT INCIDENT

N/A

FAILED PART(S)

☒ Original☐ Replacement

FAILED PART(S) AVAILABLE?

☐ Yes☒ No

NHTSA PREVIOUSLY CONTACTED?

☒ Yes☐ No

To report defective or failed tires provide the following: Tire
Brand, Tire Name, Tire Size (include all number and letters).

TIRE NAME

COMPLETE TIRE SIZE

TIRE BRAND

- ☐ BF Goodrich
☐ Cooper
☐ Firestone
☐ Goodyear
☐ Kelly Springfield
☐ Michelin
☐ Yokohama
☐ Other _____

HANDICAPPED ADAPTIVE

☐ Yes☒ No

APPLICABLE 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 1 2 3 4 5 6 7 8 9

0 1 2 3 4 5 6 7 8 9

NUMBER OF FATALITIES

0 1 2 3 4 5 6 7 8 9

0 1 2 3 4 5 6 7 8 9

CAUSE OF INCIDENT

- ☐ Wear/Corroded/Rust
☐ Weak/Poor Fit/Loose
☐ Out of Trim
☐ Disconnect/Fell Off
☐ Erratic/Poor Performance
☐ Excessive Effort
☐ Noisy
☐ Leaks
☐ Snort
☐ Locks/Sticks/Grabs
☐ Stability/Vibration
☐ Broken

RESULT OF INCIDENT

- ☐ Exposure/Fire
☐ Loss of Control
☐ Poor Visibility
☐ Inadvertent Start
☐ Rollover
☐ Stalls
☐ Sudden Acceleration

PLEASE DO NOT WRITE IN THIS AREA



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