



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) 366-0123
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 8/16/01	Office
Reference No.	City
	State

OWNER INFORMATION (Type or Print)

Vehicle to be used for (located at bottom of windshield on driver's side)	VEHICLE MAKE Dodge	VEHICLE MODEL P14	MANUFACTURE DATE	MODEL YEAR 1996
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VEHICLE MANUFACTURER	① ② ③ ④
<input type="checkbox"/> BMW	<input type="checkbox"/> Ford
<input type="checkbox"/> Daihatsu	<input type="checkbox"/> General Motors
<input type="checkbox"/> Honda	<input type="checkbox"/> Hyundai
<input type="checkbox"/> Nissan	<input type="checkbox"/> Isuzu
<input type="checkbox"/> Subaru	<input type="checkbox"/> Volvo
<input type="checkbox"/> Saab	<input type="checkbox"/> Toyota
<input type="checkbox"/> Other	<input type="checkbox"/> VW

PURCHASE DATE 1996	DEALER'S NAME LEE DINGES	CITY LEWISTON	STATE ID	ZIP CODE 83501
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ENGINE SIZE 500	FUEL SYSTEM <input checked="" type="checkbox"/> Fuel Injection	FUEL TYPE <input checked="" type="checkbox"/> Gas	TRANSMISSION TYPE <input checked="" type="checkbox"/> Automatic	ANTILOCK BRAKES <input checked="" type="checkbox"/> No	RESTRAINT SYSTEM <input checked="" type="checkbox"/> Driver's Side Airbag <input checked="" type="checkbox"/> 2 Point Belt	CRUISE CONTROL <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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DRIVETRAIN <input checked="" type="checkbox"/> 4 Wheel	VEHICLE TYPE <input checked="" type="checkbox"/> Truck	DOORS <input checked="" type="checkbox"/> 2 Door	BODY STYLE <input checked="" type="checkbox"/> Pick Up Truck
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FAILED COMPONENT(S)/PART(S) INFORMATION

COMPONENT	NO. OF FAILURES	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).	
<input type="checkbox"/> Child Seat	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	TIRE NAME	COMPLETE TIRE SIZE
<input type="checkbox"/> Electric Lights & Alarms	<input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	TIRE BRAND	
<input type="checkbox"/> Engine & Cooling System	INCIDENT DATE JAN 2000 - JUNE 2001	<input type="checkbox"/> BF Goodrich	
<input type="checkbox"/> Equipment	MILEAGE AT INCIDENT 65,000	<input type="checkbox"/> Cooper	
<input type="checkbox"/> Fuel System, Exhaust	VEHICLE SPEED AT INCIDENT 75 MPH	<input type="checkbox"/> Firestone	
<input type="checkbox"/> Heater, Defrost, Ventilation	FAILED PART(S) <input checked="" type="checkbox"/> Original	<input type="checkbox"/> Goodyear	
<input type="checkbox"/> Inflation		<input type="checkbox"/> Kelly Springfield	
<input type="checkbox"/> Parking Brake		<input type="checkbox"/> N-chair	
<input type="checkbox"/> Power Train		<input type="checkbox"/> Yokohama	
<input type="checkbox"/> Service Brakes		<input type="checkbox"/> Other	
<input type="checkbox"/> Steering			
<input type="checkbox"/> Structure			
<input checked="" type="checkbox"/> Suspension			
<input type="checkbox"/> Visual Systems			
<input type="checkbox"/> Other			
HANDICAPPED ADAPTIVE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	FAILED PART(S) AVAILABLE? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA PREVIOUSLY CONTACTED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

APPLICABLE INCIDENT INFORMATION

Please describe in detail the accident(s), failure(s), crash(es), and injury(ies) on the back of this form.	CRASH <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NUMBER OF PERSONS INJURED <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	CAUSE OF INCIDENT <input type="checkbox"/> Wear/Corroded/Rust <input type="checkbox"/> Weak/Poor Fit/Loose <input type="checkbox"/> Cut/Torn <input type="checkbox"/> Disconnect/Fall Off <input type="checkbox"/> Erratic/Poor Performance <input type="checkbox"/> Excessive Heat	RESULT OF INCIDENT <input type="checkbox"/> Explosion/Fire <input checked="" type="checkbox"/> Loss of Control <input type="checkbox"/> Poor Visibility <input type="checkbox"/> Inadvertent Start <input type="checkbox"/> Hollowed <input type="checkbox"/> Stalls <input type="checkbox"/> Sudden Acceleration
	FIRE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NUMBER OF FATALITIES <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9	<input type="checkbox"/> Noisy <input type="checkbox"/> Leaks <input type="checkbox"/> Short <input type="checkbox"/> Locks/Sticks/Grabs <input checked="" type="checkbox"/> Stability/Vibration <input type="checkbox"/> Broken	

PLEASE DO NOT WRITE IN THIS AREA

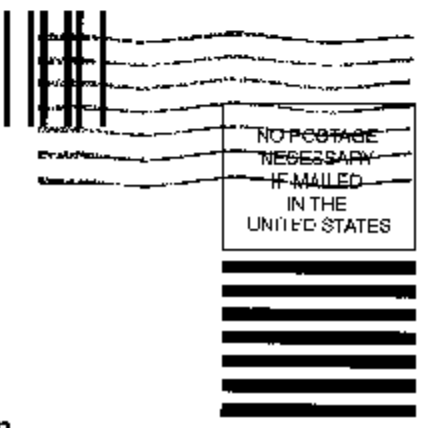


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Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

I WAS TRADING AT 75 MPH ON THE FREEWAY WHEN I HIT A BUMPER. THIS CAUSED A VIOLENT SWIRLING IN THE FRONT END! THE ONLY WAY TO KEEP CONTROL WAS TO BRAKE ABRUPTLY. CHRYSLER HAS KNOWN ABOUT THIS DESIGN FLAW SINCE 1994 BUT DID NOT INFORM CAR BUYERS. A LETTER WAS SENT TO THE DEALERS BUT NO ONE CONTACTED THE BUYERS. I BELIEVE ONLY THE V-10'S HAVE THIS MAJOR SAFETY PROBLEM.

Continue on additional page if necessary.
Describe any additional incidents. (Include date and mileage)
The Privacy Act of 1974—Public Law 93-579. This information is requested pursuant to authority vested in the National Highway Traffic Safety Administration. You are under no obligation to respond to this request. Your response may be used to access the NHTSA's database for safety recall information. Should you agree to access the NHTSA's database, you will be notified by mail. Your consent or refusal to provide information, or a withdrawal of consent, may be made in support of the agency's action.
Mark Requested by NHTSA Form 288200-1-854324 11/93 Printed in U.S.A.
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HS Form 350 (Rev. 8/79)



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
Office of Defects Investigation, NSA-10.01
400 7th Street, SW
Washington, DC 20590

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

2039070002

Complete and return or place in your car manual for future use



VEHICLE OWNER'S QUESTIONNAIRE (VOQ)

DOT AUTO SAFETY HOTLINE

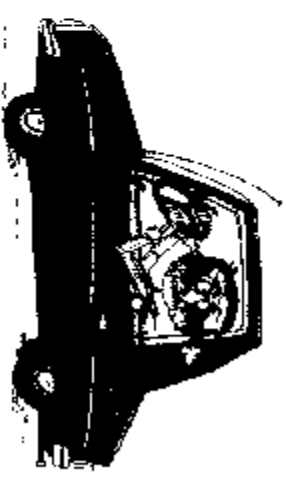
TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH 2 DOT

and dial toll free at

1-888-DASH-2-DOT

1-888-327-4236
DOT Auto Safety Hotline
(DASH) 2 DOT



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