



9/30/02

30700 Telegraph Road - Suite 4586
Bingham Farms, Michigan 48025-4532
Phone (248) 642-3232
Fax (248) 642-4558

Facsimile Cover Sheet
DaimlerChrysler Vehicle Investigation Report (VIR)

Owner:	[REDACTED]
EAA No:	DF01- 5267
CAIR No:	9130826

Transmitting <u>2</u> pages. If transmission not complete, please call the above phone number.
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To:	Keith Lawhon
Phone No:	
Fax No:	281-422-8782

From:	Tina Martin
Date Faxed:	9-12
Due Date:	9-17

Please acknowledge promptly by FAX or phone.

Receipt of CAIR and Accepting case for investigation YES NO DATE 9-12-2001

Fax Coversheet for DaimlerChrysler (Service Associate Use Only)
(also fax to EAA for closure)

Closure Date:

9-14-2001

DaimlerChrysler Fax Number: 248-512-8748

Number of pages (including cover) 7

TO:

☐ Bennis (248) 944-7036
☐ Bott (248) 944-7056
☒ Gilbert (248) 944-7037

☐ Martell (248) 944-7038
☐ Mucci (248) 944-7039
☐ Porterfield (248) 944-7134

Comments:



Confidential
Preliminary Vehicle Investigation Report

09130826
 REF. #

YEAR 2001	MODEL Dodge Ram 1500	VEHICLE IDENTIFICATION NUMBER 3B7HC13Y21G	ODOMETER 008463	M.O.H. 031500	DELIVERY DATE 5-23-01
ADDRESS/LOCATION [REDACTED]					
CITY Crosby	STATE TX	ZIP [REDACTED]	BUSINESS PHONE [REDACTED]	HOME PHONE [REDACTED]	
SELLING DEALER NAME Archer Dodge	ZONE 62	OUR 43928	CITY Houston	STATE	
CHRYSLER REPRESENTATIVE—PRINT	ZONE	PHONE	<input type="checkbox"/> MINOR <input type="checkbox"/> MODERATE <input type="checkbox"/> MAJOR		REPAIR ESTIMATE \$

INTERVIEW

INTERVIEW WITH: NAME	INTERVIEW DATE	DATE OF INCIDENT	TIME OF INCIDENT	INSPECTION DATE
<input type="checkbox"/> DRIVER <input type="checkbox"/> OWNER <input type="checkbox"/> OTHER		09/11/01	AM PM	09/13/01

DESCRIPTION OF EVENT: (INCLUDING: WEATHER CONDITIONS AND ROAD SURFACE)

- ☐ Driver's and/or occupant's description of incident
- ☐ What? When? Where? How?
- ☐ Exact order of events
- ☐ Did this happen before?
- [Handwritten: was driving at time of incident. I was unable to interview Max on [REDACTED] out of town on business.]*

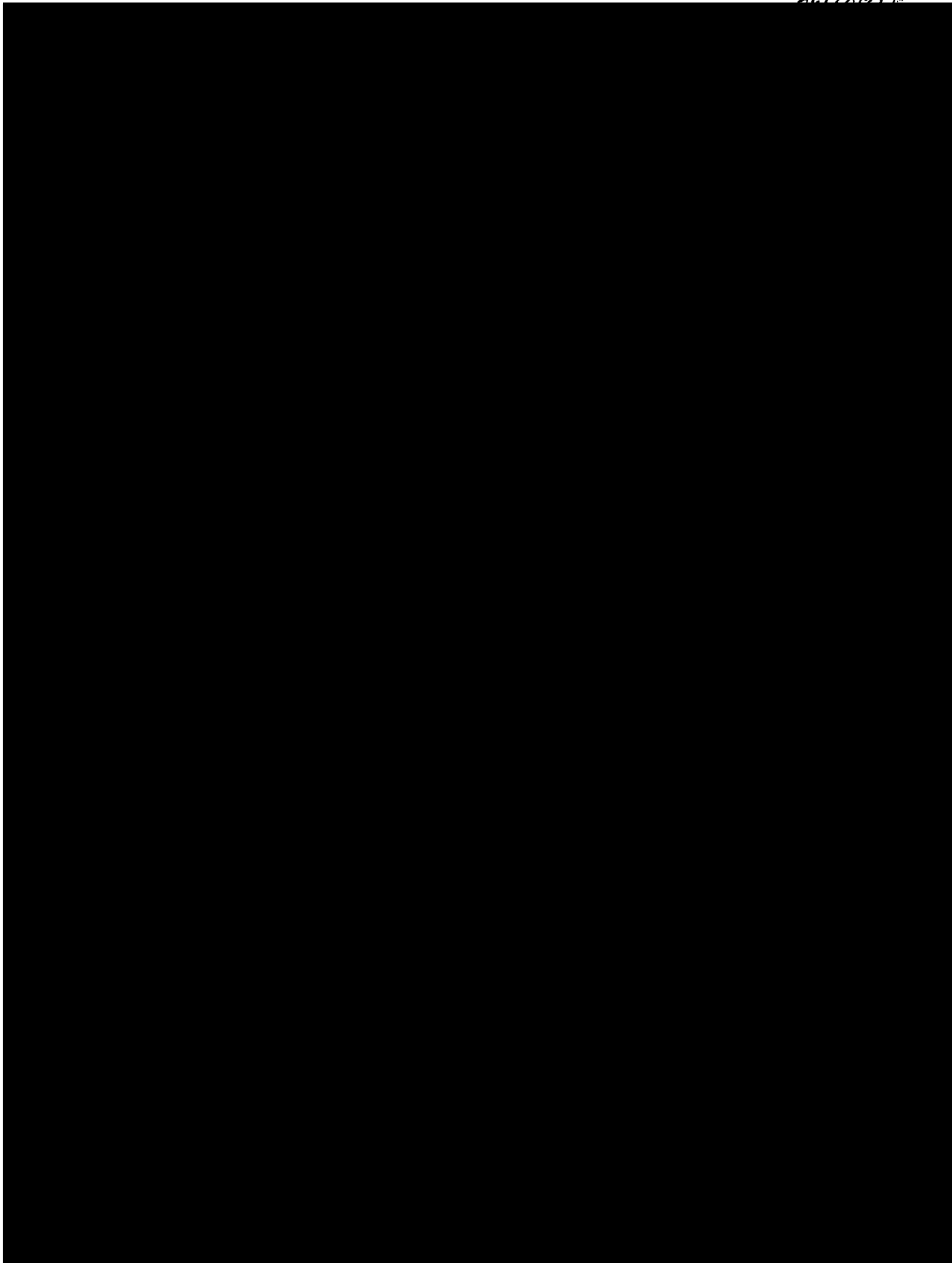
Personal Injury: Were there Personal Injuries? ☐ Yes ☒ No If yes, complete section "L."

IMPORTANT: SHOW TO NO ONE & DRAW NO CONCLUSIONS

- DIRECTIONS:**
- FILL OUT UPPER PART OF FORM.
 - FOR "FIRE" USE FORM 84-130-6950.
 - FOLLOW INSTRUCTIONS FOR SECTION "A" ON ALL VEHICLES.
 - FOLLOW INSTRUCTIONS FOR SPECIFIC ALLEGATIONS FOR THIS VEHICLE.
 - ATTACH ANY ADDENDUMS TO REPORT AND STATE SECTION IT PERTAINS TO.

- COMMENTS:**
- NOTE ANY MISSING COMPONENTS AND WHO REMOVED THEM.
 - NOTE ANY AFTERMARKET EQUIPMENT INSTALLED AND BY WHOM.

ALLEG.	PHOTOGRAPH REQUIRED	INFORMATION	EVALUATION	
General A	<input type="checkbox"/> From center of vehicle front every 45 degrees (8 total) <input type="checkbox"/> If crash damaged — perspective from every corner of vehicle down both original lateral sight lines. (8 total)	<input type="checkbox"/> Police report <input type="checkbox"/> Vehicle service file <input type="checkbox"/> Any reports/photos by others <input type="checkbox"/> Location of inspection	<input type="checkbox"/> Driver's and/or occupant's description of incident <input type="checkbox"/> What? When? Where? How? <input type="checkbox"/> Exact order of events <input type="checkbox"/> Did this happen before?	
			<input type="checkbox"/> Complete exterior damage diagram and measurements on last page.	
	<input type="checkbox"/> Send neg. & 2 sets of prints			
Airbag(s) B	<input type="checkbox"/> Steering Wheel <input type="checkbox"/> Airbag(s) <input type="checkbox"/> Knee Blockers <input type="checkbox"/> All possible body contact areas <input type="checkbox"/> All code readings using DRB II	<input type="checkbox"/> Record: <i>Not Applicable</i> <input checked="" type="checkbox"/> Was Airbag deployed? Driver <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Passenger <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Type of Steering Wheel <input type="checkbox"/> Tilt <input type="checkbox"/> Std. <input type="checkbox"/> Condition of Steering Wheel _____ <input type="checkbox"/> Condition of Steering Wheel Mounting (measure column collapse)	<input type="checkbox"/> Use DRB II <input type="checkbox"/> Record Existing Readings 1 _____ 2 _____ 3 _____ <input type="checkbox"/> Record Stored Readings 1 _____ 2 _____ 3 _____ <input type="checkbox"/> Important: DO NOT ERASE DRB II READINGS.	<input type="checkbox"/> Evidence of tampering or disassembly? <input type="checkbox"/> Yes <input type="checkbox"/> No



09/14/2001 08:09 FAX 281 422 8782

KEITH LAWHON

004

09121237

09130826

September 13, 2001

Inspected 2001 Dodge Ram Extended Cab VIN 3B7HC13Y2 [REDACTED] at
Archer Dodge, Houston, Texas.

[REDACTED] stated that her hood blew up while driving.

I inspected both of the truck's primary and secondary hood latches, and inside hood release. I found all to be operating as designed.

The hood popped up to the secondary latch when the inside hood release was pulled. The secondary latch would hold under very abnormal force applied by trying to open hood by lifting the hood at the front of the truck.

The primary latch would hold under the same test of sever lift pressure at the front of the truck.

Nether hood latch show any sign of damage or alteration.

The damage to the hood was minimal, both hinges were bent, and were very stiff and hard to operate as a result of the hood over extending them. The hood itself has a curled up dent at the right rear corner and a small one on the left rear corner.

The damage appeared to have been cause by the hood opening being over extended but I could not find any latch failure to cause it to open inadvertently.

The truck was last service by:

Kwik Kar Lube & Tune

14202 FM 2100

Crosby, Texas 77532

(281) 328-6770

noted on sticker on inside of windshield at left upper corner

CUSTOMER #:1G770943

50193

WORKORDER

PAGE 1

ARCHER
DODGE RV
12057 HWY 190
Stafford, Texas 77477
(281) 530-8000

CORSBY, TX
HOME:

BUS

SERVICE ADVISOR: 313 JERRY MURRY

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG
BLACK	01	DODGE QUAD CAB	3B7HC13Y21C		8462/	T8462
DEL DATE	PROD DATE	WARR EXP	PROMISED	PO NO	RATE	PAYMENT
20MAR2001			08:00 25SEP01		0.00	CASH
R.O. OPENED	READY	OPTIONS: STK:141442				

11SEP2001 10:28

LINE OF CODE TECH TYPE DESCRIPTIONS/INSTRUCTIONS

A 110 WD94 HOOD FLEW OPEN WHILE DRIVING

B RAC WD94 CUSTOMER HAS RENTAL CAR

ISO

EXCLUSION OF WARRANTIES

It is understood that this Company assumes no responsibility for Loss or Damage by Theft or Fire to vehicles placed with them for Storage, Sale or Repair, or Damage to vehicle when Called for and Delivered, or while Road Testing. The above bill for labor and material is approved, and an express mechanic's lien is granted on said vehicle to secure the payment thereof, said obligation being payable in Houston, Harris County, Texas, and in event of default, I agree to pay in addition thereto a reasonable attorney's fees; permission is granted to you to drive said vehicle on any street or road for the purpose of testing and inspecting the

Any warranties on the products sold hereby are those made by the manufacturer. The Seller, ARCHER DODGE RV, hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose, and ARCHER DODGE RV neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of said products.

AUTHORIZED BY

RECEIVED BY

I am the person or an agent acting on behalf of the person, who is obligated to pay for the repair of the motor vehicle subject to the repair contract. I understand that this vehicle is subject to repossession in accordance with §9.503, Texas Business and Commerce Code, if a payment order or payment for repair of the vehicle is stopped, dishonored because of insufficient funds, no funds, or because the drawer or master of the order has no account or the account on which it is drawn has been closed.

PRELIMINARY ESTIMATE \$

AUTHORIZED BY X

REVISED ESTIMATE (1)	DATE	TIME	BY
REVISED ESTIMATE (2)			
REVISED ESTIMATE (3)			

I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROVAL OF THE ABOVE REVISED ESTIMATES:

X

CUSTOMER SIGNATURE

Signature of Person Responsible or Agent for Payment

HARD COPY