



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1374

Date Received

Repository

09-JAN-2003

Reference No.
10002447

OWNER INFORMATION (Type or Print)

DEFECTS

OFFICE INVESTIGATION

Name

Address

City

THE VILLAGES

State FL

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of an authorized signature, provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 1/29/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

DODGE

Model

GRAND CARAVAN

Model Year

1997

104BP44RXVB331896

Date Purchased

4-30-97

Dealer's Name and Telephone Number

Joe Cecconi's Chrysler

Engine:

No. Cylinders

6

Fuel Type:

GAS

Original Owner

Dealer's City

NIAGARA FALLS

State

NY

Zip Code

14304

Transmission Type

AUTO

Antilock Brakes

Cruise Control

Powertrain

FRONT WHEEL DRIVE

Vehicle Component Code

121000 EXTERIOR LIGHTING: HEADLIGHTS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

2001

Failure Mileage

52000

Failure Speed

NA

HEADLIGHTS - SEE BELOW

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM149ABC036)

Original Equipment
 After Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash

Yes No

Fire

Yes No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).

CONSUMER STATES THAT THE HEAD LIGHT LENS IS DISCOLORING CAUSING LOW VISIBILITY AT NIGHT. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. *NUM OVER LAST YEAR HEAD LIGHTS ARE HAZING OVER. CHECKED

OTHER VANS OF DODGE OR PLYMOUTH HAVE SEEN AT LEAST 25% OF THEM TO HAVE SAME PROBLEM. CUTS DOWN ON NIGHT VISIBILITY. CHRYSLER HAS NO FIX. REPLACEMENTS COST \$295.00/LIGHT WITHOUT LABOR. MANUFACTURER OF LIGHT APPEARS TO BE SYLVANIA

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.