



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](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY 100079

Date Received

05-MAY-2003

Repository

Reference No.  
10018155

**OWNER INFORMATION (Type or Print)**

Name

Address

City

GLEN BURNIE

State MD

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 authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 5/20/03

**VEHICLE INFORMATION**

17 digit vehicle identification number located at top of windshield near driver's side  
1B4GP44R3XB640337

Make

DODGE

Model

GRAND CARAVAN

Model Year

1999

Date Purchased

4-02

Dealer's Name and Telephone Number

MINIVAN STORE 4107608200

Engine:

No. Cylinders

Fuel Type:

Original Owner

Dealer's City

GLEN BURNIE

State

MD

Zip Code

21061

Transmission Type

auto

Antilock Brakes

Cruise Control

Powertrain

Vehicle Component Code

010000 STEERING

Multiple Failure: yes

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s)

05-MAY-2003

Failure Mileage

Failure Speed

**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: DOTM19ABC036)

Original Equipment  
 Prior 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).

NHTSA #02-V-293-000. ON CERTAIN MINI VANS, THE CLOCKSPrING ASSEMBLY MAY HAVE BEEN WOUND INCORRECTLY DURING THE VEHICLE ASSEMBLY PROCESS. CONSUMER HAS THE SAME PROBLEM. A RECALL HAS BEEN ISSUES ON SIMILAR MAKES AND MODELS. HOWEVER THIS VEHICLE IS NOT INCLUDE DUE THE VIN#.

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 93-502) 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.