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 1367

Date Received: 02-JUL-2003 (2003 AUG 18 AM 8:0)
Repository ☐
Reference No.: 10026410

OWNER INFORMATION (Type or Print)

Name: [redacted]
Address: [redacted]
City: WALDEN | State: NY | Zip Code: [redacted]
Daytime Telephone Number: [redacted]
Evening Telephone Number:
E-mail Address:

Do you authorize NHTS[redacted]t to the manufacturer of your vehicle? ☑ YES ☒ NO
In the absence of an a[redacted]rovide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 8/2/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number (VIN) located at bottom of windshield on driver's side: 1P4GH54R5NX219155
Make: DODGE
Model: CARAVAN
Model Year: 1992
Date Purchased:
Dealer's Name and Telephone Number: NEWBURGH PARK MOTORS 562 4380
Engine: No. Cylinders 6
Fuel Type: GAS
Original Owner: 3RD OWNER
Dealer's City: NEWBURGH
State: NY | Zip Code: 12550
Transmission Type: AUTO
☒ Antilock Brakes
☒ Cruise Control
Powertrain: 3.3 V6
Vehicle Component Code: 036400 SERVICE BRAKES, HYDRAULIC:ANTILOCK:ABS WARNING LIC
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
6-12-03	146040	45 mph

6-4-03 ACTUATOR WAS REPLACED BY PARK MOTORS
LATER ON 6-12-03 BRAKES FAILED PARK MOTORS TOLD ME THAT VEHICLE WAS NO LONGER COVERED

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

DISCARDED IT WAS TOO OLD

Tire Make:
Tire Model (Name or Number):
Tire Size (Example P215/65R15):
DOT No. (Example: DOTMAL9ABC036):
☐ 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 Systems:
Child Seat Component Code:
Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Fire(s), Crash(es), and Injury(ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

VEHICLE HAS A VALVE LEAK THAT RESULTS IN ABS FAILURE. THE DEALERSHIP REPLACED THE ACTUATOR, BUT THE PROBLEM STILL EXISTS.*AK

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 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.