



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 100079

Date Received

Repository

2003 SEP - 2 08:44 AM '01

Reference No.
10032485

OWNER INFORMATION (Type or Print)

Name

Address

City DES MOINES

State WA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number
Same

None

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, please print your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 9/24/03

VEHICLE INFORMATION

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

1 C 4 G J 2 5 B 0 3 B 132475

Make

CHRYSLER

Model

VOYAGER

Model Year

2003

Date Purchased
9-21-02

Dealer's Name and Telephone Number
Huling Brothers 206-938-6146

Engine: 2.4L
No: Cylinders

Fuel Type:
Gas

Original Owner
KX

Dealer's City
Seattle,

State
Wash

Zip Code
98126

4

Transmission Type

Antilock Brakes

Powertrain

Vehicle Component Code

341000 COMMUNICATIONS:HORN ASSEMBLY

4 Sp Auto

Cruise Control

Multiple Failure: 3

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
08-AUG-2003

Failure Mileage

Failure Speed

Horn does not work due to no central point of contact

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;
ie, parts repaired or replaced (and if old part is available).

THE HORN WAS REPAIRED THREE TIMES, HOWEVER THE PROBLEM RECUR RED. *JB reported

I reported to the dealer ^{3 TIMES} that this horn does not work easily but dealer says "That was the way the car was built"

I tried to use the horn three times in order to avoid contact with another vehicle. Horn did not work. Safety hazard I would not be able to warn a ~~pedestrian~~ PEDESTRIAN of imminent danger.

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.