



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 231

Date Received

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Repository

Reference No.
10033796

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: CARTERET State: NJ Zip Code: [REDACTED]

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 address for the manufacturer, please provide an address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 9/3/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: **1C4GH54L1RX271873**

Make: CHRYSLER Model: TOWN AND COUNTRY Model Year: 1994
Date Purchased: 3/19/94 Dealer's Name and Telephone Number: WARNOK 973-575-0800 Engine: No. Cylinders: 6 Fuel Type: Unleaded
Original Owner: Dealer's City: EAST HANOVER State: NJ Zip Code: 07936
Transmission Type: AUTO Antilock Brakes: Powertrain: Front Wheel Drive
Cruise Control: Vehicle Component Code: 121000 EXTERIOR LIGHTING: HEADLIGHTS
Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	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: DOTM15ABC036) 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), condition, and injury(ies).

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).

CONSUMER STATES HEADLIGHT LENS HAS GRADUALLY TURNED YELLOW WHICH CAUSES POOR ILLUMINATION. DRIVER HAS DIFFICULTY DRIVING AT NIGHT DUE TO INSUFFICIENT LIGHTING. *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 Administration and subsequent amendments. You are under no obligation to respond to this questionnaire. Your responses 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 a administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies) ^{Headly mechanism}

THE ABILITY TO SEE AT NIGHT PROVIDES THE DRIVER TO OPERATE THE VEHICLE SAFELY TO PREVENT INJURY TO THE DRIVER OR INDIVIDUALS IN ITS PATH. CHANGING THE BULBS DOES NOT HELP THE SITUATION. CHRYSLER HAS ADMITTED THEY HAVE A PROBLEM WITH THIS MODEL YEAR. CARS ARE FAILING INSPECTION AND THEY HAVE HAD SEVERAL COMPLAINTS. TO DATE THERE HAS BEEN NO ACCIDENTS WHILE DRIVING WITH THESE HEAD LIGHTS. BUT THIS IS A VERY SERIOUS HEAD LAMP FAILURE. I SEE THIS DEFECT IN CHRYSLER AND OTHER MANUFACTURER HEAD LAMP'S. AFTER THE THOUSANDS OF DOLLARS I HAVE SPENT OVER THE YEARS MAINTAINING MY VEHICLE I WASH CHRYSLER WOULD STEP UP TO THE PLATE AND FIX THIS PROBLEM.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 79173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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(DASH) 2 DOT



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