



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  
(1-888-327-4238)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100184

Date Received  
2003 NOV - 06-OCT-2003 17

Repository   
Reference No.  
10042378

OWNER INFORMATION (Type or Print)

Name [REDACTED]  
Address [REDACTED]  
City LIBERTYVILLE State IL Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]  
Evening Telephone Number [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner [REDACTED] Date 10/16/03  YES  NO

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side  
2B4GP44R9TR670549 Make DODGE Model GRAND CARAVAN Model Year 1998  
Date Purchased Sept 1999 Dealer's Name and Telephone Number Gregory Padee 847-831-5980 Engine: No. Cylinders 6 Fuel Type: Gas  
Original Owner  Dealer's City Highland Park State IL Zip Code 60035  
Transmission Type AUTOMATIC  Antilock Brakes  Cruise Control Powertrain  
Vehicle Component Code 021000 SUSPENSION:FRONT  
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 03-OCT-2003 Failure Mileage 97000 Failure Speed 103000

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/66R15) [REDACTED]  
DOT No. (Example: DOTM4L9ABC036)  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code [REDACTED] Tire Failure Type [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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 0 Number of Deaths 0 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).

WHILE GETTING THE VEHICLE SERVICED CONSUMER NOTICED THAT THE STRUT ASSEMBLY ON LEFT FRONT HAD COMPLETELY RUSTED OUT. CONSUMER WAS TOLD BY A CERTIFIED MECHANIC THAT AFTER A FEW MORE MILES THE ENTIRE FRONT SUSPENSION WOULD COLLAPSE. DEALER WAS NOTIFIED OF THE PROBLEM. \*AK

CORRECTION STRUT MTS TOWER (BODY STRUT MTS TOWER) ON DRIVER SIDE.

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.

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

Repairs made by Performance Restorations 1500 Mc Caranick  
Blvd, Mundelein IL 60060 Phone 847 566-7429  
FAX 847 566-7470 Estimate ID [REDACTED]

Ms. Sandra Revis

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 73173 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



**VEHICLE OWNER'S QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
ON

**DASH2DOT**  
and dial toll free at

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**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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http://www.safercar.gov