



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

01/22/04

Reference No.

10052112

OWNER INFORMATION (Type or Print)

Name

Address

City

LAKELAND

State

FL

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, you will not be able to provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 01/22/04

VEHICLE INFORMATION

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

2B46P446XX

Make

DODGE 1999

Model

GRAND CARAVAN

Model Year

1999

Date Purchased

10/99

Dealer's Name and Telephone Number

Engine:

No: Cylinders 6

Fuel Type:

Gas

Original Owner

Dealer's City

TAMPA

State

FL

Zip Code

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

UNKNOWN

Vehicle Component Code

140000 AIR BAGS

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
30-DEC-2003

Failure Mileage
11000

Failure Speed

CLOCK SPRING 04685835AEC
23199 MI

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 Systems

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).

THE AIR BAG LIGHT ILLUMINATED, THE CRUISE CONTROL AND HORN WERE NOT WORKING. THE DEALER REPLACED THE CLOCK SPRING AT OWNER EXPENSE OF \$300 DOLLARS. PLEASE PROVIDE ANY ADDITIONAL INFORMATION. *NM

A RECALL ON DODGE CARAVANS ON JACK SPRINGS UP TO 1998. MY VAN HAD SAME PROBLEMS OF AIR BAG VAN AIR BAG LIGHT ON, HORN DID NOT WORK AND CRUISE CONTROL NOT WORKING. I PAID \$228.00 TO FIX VAN. I WOULD LIKE A REFUND. I WILL BE LOOKING TO REPLACE THIS VAN THIS YEAR. A REFUND WOULD GREATLY INFLUENCE

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.

- MY DECISION ON WHAT KIND OF VAN I WILL BUY IN THE FUTURE. A DODGE OR FORD. (OLD PART IS AVAILABLE)

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

RECALL ON ROOSE CARAVANS UP TO 1998 (CHECK SPRING)
MY VAN IS A 1999 BUT HAS SAME PROBLEMS AS
EARLIER VANS. AIR BAG LIGHT ON (SAFETY PROBLEM)
HORN DID NOT WORK (SAFETY PROBLEM) AND
CRUISE CONTROL DID NOT WORK ALL THREE PROBLEMS
IN EARLY CASES OF ROOSE CARAVAN BUT MY VAN
WAS NOT IN RECALL WHY? I PAID \$828.00 TO
FIX MY VAN. I WOULD LIKE A RE FUND. I AM
LOOKING TO REPLACE VAN THIS YEAR. A RE FUND
ON REPAIR WORK THAT WAS A SAFETY HAZARD
WOULD GREATLY INFLUENCE MY DECISION ON WHAT
KIND OF VAN I WILL BUY. RIGHT IS RIGHT AND
WRONG IS WRONG (DO THE RIGHT THING)

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**

1 AUTO SAFETY HOTLINE

REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

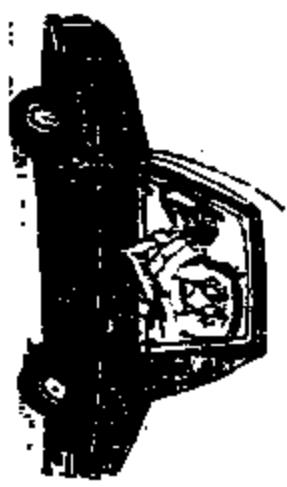
DASH2DOT

and dial toll free at

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1-888-327-4238

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(DASH) 2 DOT



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Administration
<http://www.nhtsa.dot.gov/odiv>