



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 2004 FEB 19 PM 2:56
05-JAN-2004

Repository
Reference No.
10053348

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City KEARSARGE State NH Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] 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, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 2B4GP4439TR [REDACTED] Make DODGE Model GRAND CARAVAN Model Year 1996

Date Purchased 5/99 Dealer's Name and Telephone Number Miller Chrysler Engine: No: Cylinders 6 Fuel Type: 9A5
Original Owner Dealer's City Wolfeboro N.H. State NH Zip Code _____

Transmission Type Auto Antilock Brakes Powertrain _____ Cruise Control
Vehicle Component Code 114100 ELECTRICAL SYSTEM: WIRING: FRONT UNDERHOOD
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 02-JAN-2004 Failure Mileage 109000 Failure Speed parked

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 None Number of Deaths None Reported to Police Y YES

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).

SMOKE APPEARED FROM UNDER THE HOOD, THEN BURST INTO FLAMES. THIS OCCURRED WHILE THE VEHICLE WAS PARKED AND TURNED OFF. VEHICLE WAS TOTALED.*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 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)

*on 1/2/04 the Automobile Panel and was destroyed
see fire report and or police report.*

Shanklin



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



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DASH2DOT

and dial toll free at

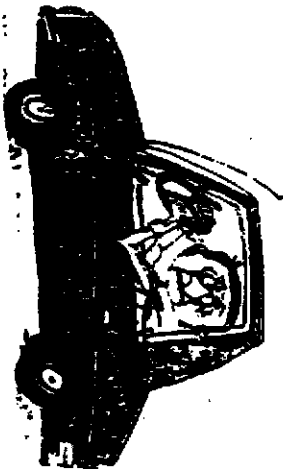
1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline
(DASH) 2 DOT



**VEHICLE
OWNER'S
QUESTIONNAIRE**



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.nhtsa.dot.gov/hotline>

Preliminary Report

Bartlett Fire Department

Date 1/2/04

Apparatus Responding 21C2, 21E1, 20T3 Miles Traveled 5

Incident No. 04-001 Method of Alarm 911 No. Crew Members 5

Time of Alarm 13:45 Time Off 13:50 Time Secured 15:45

Mutual Aid Given or Received N/A No. Mutual Aid Members N/A

Owners Name [REDACTED] Address [REDACTED] Keatsville, N.H.

Tel. No. [REDACTED] Bld. or Apt. No. _____

Occupants Name _____ Address _____

Tel. No. _____ Bld. or Apt. No. _____

Location of Incident Summit of Linderhof

Situation Found Vehicle Fire - front of vehicle fully involved approx. 6' away from a Condo Unit

Area of Origin engine compartment

Was Fire Confined to Area of Origin yes Was Fire Suspicious no

Equipment Involved in Ignition N/A

Equip. Year N/A Make N/A Model N/A Serial No. N/A

Auto Year 1996 Make Dodge Model Caravan Serial No. 2B46P4439TR

Type Material Ignited And Source Undetermined

Type Structure N/A Type Construction N/A

Extent of Flame Damage 50% Smoke 100% Water 50%

Smoke Detector Performance N/A Sprinkler Performance N/A

Lines Used 100' 1 3/4" Extinguishers 1 private owned

Breathing Apparatus N/A Ladders N/A

Weather Condition Cloudy Temperature 27°F

Mobile Property Year N/A Make N/A Model N/A

Officer in Charge L. Patrick Roberts Title ASST. Chief

Notes on Rear Yes

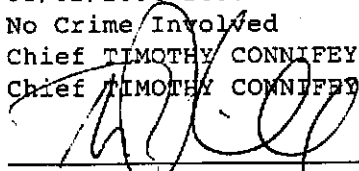
Arrived at scene, 5 units of 1 unit, vehicle fire, eng
compartment area fully involved. Able to pull vehicle away from
Building with a plow Truck operated by one employee of
A. Eastman and Son Inc. Prior to Engine 1's arrival fire did
extend into dash board area. Extinguished Fire, checked for
fire extension and hot spots, remained on scene for approx
1 hr. Vehicle loaded on Mt. Washington Towing's vehicle.
Cable unit suffered no visible damage. Asked owner if there
were any problems with the vehicle while driving to hinderhot
and [REDACTED] said that his vehicle was running fine
when he parked it.

L. Patrick Roberts

Bartlett Police Department
Incident Report

Page: 1
01/05/2004

Incident #: 04-233-OF
Call #: 04-004




Date/Time Reported: 01/02/2004 1400
Report Date/Time: 01/05/2004 0853
Occurred On: 01/02/2004 1400
Status: No Crime Involved
Reporting Officer: Chief TIMOTHY CONNIFEY
Approving Officer: Chief TIMOTHY CONNIFEY
Signature: 

EVENTS(S)

LOCATION TYPE: Residence/Home/Apt./Condo Zone: GLEN
SUMMIT AT LINDERHOF
LINDERHOF
BARTLETT NH 03812

1 POLICE INFO - CAR FIRE C

VICTIM(S) SEX RACE AGE SSN PHONE

1  M W 57 NOT AVAIL 
KEARSARGE NH 
DOB: 12/26/1946
ETHNICITY: Not of Hispanic Origin
RESIDENT STATUS: Non Resident
VICTIM CONNECTED TO OFFENSE NUMBER(S): 1

VEHICLE(S) YEAR MAKE STYLE COLOR1 COLOR2 REG VALUE

1 CARAVAN 1996 DODG WHI NH 449008 \$1.00
STATUS: Burned DATE: 01/05/2004
OWNER: 
VIN: 2B4GP4439TR 