

 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 120 Date Received 2004 APR 29 PM 2:17 22-MAR-2004		Repository <input type="checkbox"/> Reference No. 10064642	
		Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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			
OWNER INFORMATION (Type or Print)							
Name		Address		Daytime Telephone Number		E-mail Address	
City		State		Zip Code		Fax Telephone Number	
MARSHFIELD		MO					
VEHICLE INFORMATION							
17 digit Vehicle Identification Number located at bottom of windshield on driver's side				Make		Model	Model Year
1C4GJ25B028553482				CHRYSLER		VOYAGER	2002
Date Purchased		Dealer's Name and Telephone Number		Engine:		Fuel Type:	
02/08/2002		Young Blood Chrysler, (417) 882-3838		No: Cylinders		GAS	
Original Owner		Dealer's City		State	Zip Code	FOUR	
<input checked="" type="checkbox"/>		Springfield		MO	65807		
Transmission Type		<input type="checkbox"/> Antilock Brakes		Powertrain		Vehicle Component Code	
AUTO		<input checked="" type="checkbox"/> Cruise Control		4 CYL.		022000 SUSPENSION; REAR	
						Multiple Failures: 2	
FAILED COMPONENT(S)/PART(S) INFORMATION							
Incident Date(s)		Failure Mileage		Failure Speed		PLEASE SEE INVOICE PROVIDED.	
22-MAR-2004		21,200 40,629		30 MPH. 35			
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: DOTMALBABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).							
CONSUMER STATED THAT IN INCLEMENT WEATHER BACK END LOCKED UP. THIS ALMOST RESULTED IN A COLLISION. CONSUMER TOOK VEHICLE TO THE DEALER, AND THEY KEPT IT FOR APPROXIMATELY 10 DAYS. THEN, DEALER TOLD CONSUMER THAT THEY PUT A RETAINER PLATE ON THE VEHICLE. WHEN THIS PROBLEM HAPPENED THE SECOND TIME DEALER TOLD CONSUMER THAT THEY COULD NOT REPRODUCE THE PROBLEM, AND THAT THIS WAS A SEASONAL PROBLEM WHICH WOULD NOT HAPPENED ALL THE TIME. *AK SEE INVOICE: REPAIRS MADE TO BRAKE SYSTEM. VEHICLE HAD TO BE TOWED BOTH TIMES, TO DEALER SHOP. WE ARE NOW AFRAID TO DRIVE VAN, BECAUSE OF POSSIBLE BODILY INJURY OR DEATH.							
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(es)

① DRIVING WIFE TO WORK ABOUT 2 MILES FROM HOME ON A COLD AND SNOWING DAY, ABOUT 30+35 MILES AN HOUR WHEN ALL OF A SUDDEN THE BACK END OF THE VAN LOCKED UP. IT BEING A FRONT WHEEL DRIVE THE VAN WENT SIDE TO SIDE ON THE ROAD, COULD NOT CONTROL VAN WE ALMOST WENT IN TO A RIVER, IF TRAFFIC HAD BEEN COMING ALSO WOULD HAVE WRECKED WHEN WE WERE GOING SIDE TO SIDE ACROSS BRIDGE

② WAS GOING TO A FRIEND'S HOUSE DOWN THE ROAD AGAIN COLD SNOWY CONDITIONS WHEN VEHICLE AGAIN LOCKED UP. VAN ALMOST SKID OFF INTO DITCH. (I HAVE CONTACTED CHRYSLER HEADQUARTERS NUMEROUS TIMES, AS WELL AS DEALERSHIP. CHRYSLER REF # IS [REDACTED] THAT IS MY CASE NUMBER. PLEASE FEEL FREE TO CALL AND ASK ABOUT. THANK YOU FOR YOUR TIME.)
AKC # [REDACTED]

ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department of Transportation

National Highway Traffic Safety Administration

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

Official Business
Penalty for Private Use \$200



POSTAGE WILL BE PAID BY MAIL 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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National Highway Traffic Safety Administration
http://www.nhtsa.gov



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(DASH) & DOT

1-888-327-4238

1-888-DASH-2-DOT

and dial toll free at

DASH2DOT

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

At 1-800-471-
DOT AUTO SAFETY HOTLINE

VEHICLE
OWNER'S
QUESTIONNAIRE

**THE ATTACHMENTS TO THIS
DOCUMENT HAVE BEEN REMOVED
TO PROTECT UNWARRANTED
INVASION OF PERSONAL PRIVACY
PURSUANT TO EXEMPTION 6 OF
THE FREEDOM OF INFORMATION
ACT (FOIA), 5 U.S.C. 552(b)(6).**