



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

20-MAY-2004
20-APR-2004

Repository ☐

11-28
Reference No.
10067504

OWNER INFORMATION (Type or Print)

Name

Address

City

SPENCER

State

WI

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, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
Signature of Owner _____ Date 5/10/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side
4P3CG44F6P

Make
PLYMOUTH

Model
LASER

Model Year
1993

Date Purchased
JAN, 00

Dealer's Name and Telephone Number
PRIVATE PARTY

Engine:
No. Cylinders
4

Fuel Type:
GAS

Original Owner
☐

Dealer's City

State

Zip Code

Transmission Type

☒ Antilock Brakes

Powertrain

☐ Cruise Control

Vehicle Component Code

036000 SERVICE BRAKES, HYDRAULIC; ANTILOCK

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
12-MAY-2003

Failure Mileage
72000

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: 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

Number of Deaths

Reported to Police

Y

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).

INTERMITTENTLY WHILE DRIVING ON DRY PAVEMENT ABS BRAKES ENGAGED. WHEN THIS OCCURRED BRAKE PEDAL BECAME HARD AND PULSATED AS IF THE VEHICLE WAS ON AN ICY SURFACE. ALSO, FAILED TO STOP VEHICLE WHEN THIS OCCURRED. THIS RESULTED IN EXTENDED STOPPING DISTANCE, CAUSING TWO CRASHES. VEHICLE JUMPED OVER A CEMENT PARKING BLOCK, AND RAN INTO A BRICK BUILDING ON TWO SEPARATE OCCASIONS. CONSUMER REMOVED THE ABS FUSE, AND FAILURE HASN'T RECURRED. *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 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 administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.