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

2004 JUN 14 PM 5:24

FOR AGENCY USE ONLY 100145	
Date Received 13-MAY-2004	Repository ☐
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OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City SOLVANG	State CA	Zip Cod [redacted]	

Do you authorize [redacted] vehicle? ☑ YES ☒ NO
In the absence of [redacted] to the vehicle manufacturer.
Signature of Own [redacted] Date 5/21/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1C4GT64LXX[redacted]	CHRYSLER	TOWN AND COUNTRY	1999

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
	☐ Antilock Brakes ☐ Cruise Control		140000 AIR BAGS Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-MAY-2004	94000		CLOCKSPRING ASSEMBLY

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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).

AIR BAG SENSOR LIGHT STAYED ON. CONSUMER WAS CONCERNED THAT THE AIR BAG WOULD NOT DEPLOY UPON IMPACT. A RECALL WAS ISSUED, HOWEVER, THIS VEHICLE WAS NOT COVERED UNDER THE RECALL DUE TO VIN. *AK

CLOCKSPRING ASSY FAILURE - AIR BAG WARNING LIGHT REMAINS ON, HORN WILL NOT WORK, CRUISE CONTROL AND RADIO CONTROLS ON STEERING WHEEL DO NOT WORK, AIR BAG MAY NOT DEPLOY WHEN NEEDED! HORN DOES NOT WORK! SAFETY HAZARD!

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY