



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 100145

Date Received  
2004 JUN 30  
18-JUN-2004

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**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: PITTSBURGH State: PA Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]

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: [REDACTED] Date: 6/28/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1B46P4467XB [REDACTED]  
Make: DODGE Model: GRAND CARAVAN Model Year: 1999

Date Purchased: 6/21/1999 Dealer's Name and Telephone Number: BAUM BLUE DODGE  
Original Owner:  Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]  
Engine: No. Cylinders: 6 Fuel Type: [REDACTED]

Transmission Type: [REDACTED]  Antilock Brakes  Cruise Control Powertrain: [REDACTED]  
Vehicle Component Code: 141100 AIR BAGS:FRONTAL:SENSOR/CONTROL MODULE  
Multiple Failure: '2'

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 18-JUN-2004 Failure Message: 71514 Failure Speed: [REDACTED]  
PP-NUMBER 5093254-AA  
CLKSPRING & O/S/O

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]  
DOT No. (Example: DOTM18ABCD096): [REDACTED]  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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: 0 Number of Deaths: 0 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).

CLOCK SPRING MATERIAL INSIDE OF THE STEERING WHEEL MALFUNCTIONED. AS A RESULT, AIR BAG SENSOR LIGHT STAYED ON, AND THE HORN BECAME INOPERATIVE. \*AK CRUISE CONTROL AND AIR BAG WOULD NOT ENGAGE.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoices. 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.