



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 100079

Date Received

02-SEP-2004
PM 1:27

Repository

Reference No.
10090285

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City STERLING

State MA

Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]

E-mail Address [REDACTED]

Evening Telephone Number [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 _____ Date 9/2/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1B4GT44L1YB [REDACTED]

Make
DODGE

Model
GRAND CARAVAN

Model Year
2000

Date Purchased

Dealer's Name and Telephone Number
Harr Dodge

Engine:
No. Cylinders 6

Fuel Type:
Gas

Original Owner

Dealer's City
Worcester MA

State
ma

Zip Code

Transmission Type
AUTOMATIC

Antilock Brakes
 Cruise Control

Powertrain
FRONT WHEEL DRIVE

Vehicle Component Code
015100 STEERING:HYDRAULIC POWER ASSIST:PUMP

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
02-SEP-2004

Failure Mileage
53,000

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

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 NOTICED OIL ON DRIVEWAY. VEHICLE WAS TAKEN TO DEALERSHIP, AND TECHNICIAN INDICATED TO THE CONSUMER POWER STEERING PUMP RUSTED FROM INSIDE AND NEEDED TO BE REPLACED. AT CONSUMER'S EXPENSE OF \$785.00. *AK

as didn't no where leak was coming from could have had disastrous conditions if pump leaked dry at hi speed driving - am sorry but i have owned cars since 1949 and never heard of a pump full of oil rusting out

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 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.