



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-DDOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received: 28-OCT-2004  
Repository:   
Reference No: 10001997

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
Address: [REDACTED]  
City: MAYVILLE State: WI 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?  
In the absence of an authorized NHTSA agent, provide your name or address to the vehicle manufacturer.  
Signature of Owner: [REDACTED] Date: 11/9/04

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: 1B7GG23Y2R [REDACTED]  
Make: DODGE Model: DAKOTA Model Year: 1984

Date Purchased: [REDACTED] Dealer's Name and Telephone Number: [REDACTED]  
Original Owner:  Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]  
Engine: No. Cylinders: 8 Fuel Type: Gas

Transmission Type: AUTOMATIC  
 Antilock Brakes  
 Cruise Control  
Powertrain: 4 WHEEL DRIVE  
Vehicle Component Code: 140000 AIR BAGS  
Multiple Failures: 2

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

Incident Date(s): 28-OCT-2004  
Failure Mileage: [REDACTED]  
Failure Speed: [REDACTED]

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

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/85R16): [REDACTED]  
DOT No. (Example: DOTM18ABC036): [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).

SRS AIR BAG LIGHT APPEARED ON THE DASHBOARD AND REMAINED ON. CRUISE CONTROL FAILED TO WORK WHEN APPLIED. CONSUMER TOOK THE VEHICLE TO THE DEALER FOR INSPECTION, AND MECHANIC DETERMINED THAT THE CLOCK SPRING NEEDED TO BE REPLACED. THIS VEHICLE WAS NOT COVERED UNDER A RECALL DUE TO WM. \*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 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(ies)

QUESTION - IF CHRYSLER HAS DETERMINED THAT A DEFECTIVE COCK  
SPRING ON CARAVAN VOYAGER TOWN/COUNTY VEHICLES IS DANGEROUS  
IN THAT IT CAUSES THE AIR BAG SYSTEM TO BE INOP.

HOW COME

THEY HAVE TOLD ME THAT MY DEFECTIVE COCK SPRING ON  
MY 94 DAKOTA CAUSING MY AIR BAG SYSTEM TO BE INOP

IS NOT DANGEROUS ENOUGH TO INCLUDE  
IN THE RECALL?

I have the same situation but on a different vehicle

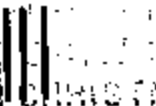
ATTACH ADDITIONAL SHEETS IF NECESSARY

US Department  
of Transportation

National Highway  
Traffic Safety  
Administration

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

Official Business  
Penalty for Private Use \$300

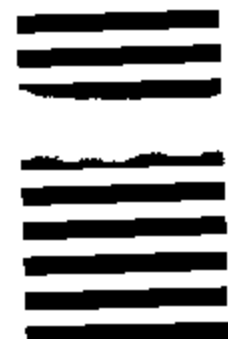


NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. 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



**VEHICLE  
OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM

OR

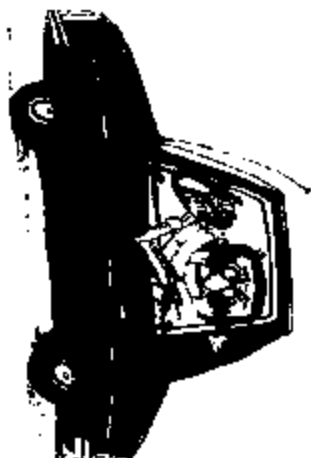
**DASH2DOT**

and dial toll free at

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