


ODI Complaint #

10099338

 <p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>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</p>		<p>FOR AGENCY USE ONLY 100216</p>	
<p>Date Received 03-NOV-2004</p>		<p>Repository <input type="checkbox"/> Reference No. 10090338</p>			
<p>OWNER INFORMATION (Type or Print)</p>					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	DEARBORN	State	MI	Zip Code	
<p>Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.</p> <p>Signature of Owner _____ Date 11/1/04</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>					
<p>VEHICLE INFORMATION</p>					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side		Make	Model	Model Year	
Z54GP2439WR615815		DODGE	GRAND CARAVAN	1999	
Date Purchased	Dealer's Name and Telephone Number		Engine No. Cylinders	Fuel Type:	
			6		
Original Owner <input type="checkbox"/>	Dealer's City		State	Zip Code	
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Vehicle Component Code		
AUTOMATIC	<input checked="" type="checkbox"/> Cruise Control		141000 AIR BAGS:FRONTAL		
			Multiple Failure: 1		
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>					
Incident Date(s)	Failure Mileage	Failure Speed			
20-OCT-2004		10			
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</p>					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM1SABC036)	<input type="checkbox"/> Original Equipment	Failure Location:			
	<input type="checkbox"/> Prior Repair				
Tire Component Code			Tire Failure Type		
<p>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</p>					
Make:	Date Manufactured:		Model No./Name:		
Seat Type:	Installation System:				
Child Seat Component Code:	Failed Part:				
<p>APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</p>					
Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police	
		0	0	Y	
<p>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).</p>					
<p>WHILE DRIVING 10 MPH DRIVER'S FRONTAL AIR BAGS INADVERTENTLY DEPLOYED. CONSUMER LOST CONTROL OF THE VEHICLE AND IT CRASHED INTO A TREE. VEHICLE WAS TOWED TO THE DEALER FOR INSPECTION. THE CAUSE HAS NOT BEEN DETERMINED. *AK Drivers Airbag Deployed at approx 10mph. Immediately Applied Brake as Airbag was in my face. While I Applied Brake van veered slightly to the right and went partially ON to a curb. causing undercarriage damage. Vehicle was towed to Dealership, cause not determined</p>					
<p>Include, if available: Police/Fire Department Report, Photos, and Repair Involes</p>			<p>ATTACH ADDITIONAL SHEETS IF NECESSARY</p>		
<p>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.</p>					