



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) 2005 APR -5  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1387

Date Received

Repository

3 5:10  
04-MAR-2005

Reference No.  
10113436

OWNER INFORMATION (Type or Print)

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City SAVANNAH State GA Zip Code \_\_\_\_\_

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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 include your name or address to the vehicle manufacturer.  
Signature of Owner \_\_\_\_\_ Date 3/25/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1C4GP54L3Y8		Make CHRYSLER	Model TOWN AND COUNTRY	Model Year 2000
Date Purchased	Dealer's Name and Telephone Number BOA MOTOR CHRYSLER, INC		Engine: 3.9L No. of Cylinders 6	Fuel Type: GASOLINE
Original Owner <input checked="" type="checkbox"/>	Dealer's City SAVANNAH	State GA	Zip Code 31406	
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain	Vehicle Component Code 061110 ENGINE AND ENGINE COOLING:ENGINE,GASOLINE:BELTS AF	
		Multiple Failure: 2		

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 04-MAR-2003 27MAR2005	Failure Mileage 1000 46500	Failure Speed 35 55	NO PART FAILURE NO PART FAILURE
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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: DOTM19ABC038)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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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).

ON 2 SEPARATE OCCASIONS THE SERPENTINE BELT CAME OFF THE PULLEY WHILE DRIVING. WHEN THIS OCCURRED THE VEHICLE LOST ENGINE COOLANT, POWER BRAKES AND STEERING, ALMOST RESULTING IN AN ACCIDENT. DEALERSHIP COULD NOT INDICATE WHY THE SERPENTINE BELT CAME OFF. THEY JUST REPLACED IT. \*AK

THE FIRST INCIDENT OCCURRED DURING LIGHT RAIN AFTER THE SECOND INCIDENT, DISCUSSION WITH THE DEALER REVEALED THAT ON SECOND EXAMINATION OF THIS FAILURE, A DRAIN HOSE FROM A PUMP REPAIR TO AN EVAPORATOR HAD FALLEN OFF AND ALLOWED WATER TO DRIP DIRECTLY ONTO THE SERPENTINE BELT. THIS SUPPOSEDLY ALLOWED THE BELT TO JUMP OFF THE PULLEYS.

MY CONTENTION IS THAT A BELT AS VITAL TO OPERATION SHOULD NOT JUMP OFF PULLEYS UNDER SUCH COMMON OCCURRENCE AS RAIN OR WATER DRIP SINCE IT TOTALLY DISRUPTS STEERING, BRAKES, ELECTRICALITY AND COOLING.

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)

THE TWO FAILURES THAT I EXPERIENCED DID NOT CAUSE ANY ACCIDENT. THE FIRST INCIDENT WAS DURING SLOW SPEED CITY DRIVING AND WAS ONLY AN INCONVENIENCE THE SECOND, HIGH SPEED INCIDENT WAS ON I-95 DURING OFF PEAK TIMES. MY CONCERN IS THAT THIS SECOND INCIDENT AT A BUSY TIME COULD HAVE RESULTED IN INJURY OR DEATH. HAD THIS OCCURRED IN OTHER THAN LEVEL TERRAIN, WITH A STRAIGHT HIGHWAY, SEVERE INJURY OR DEATH COULD HAVE HAD A HIGH PROBABILITY. CULLEYS ON SUCH SYSTEMS SHOULD BE DESIGNED TO RETAIN BELT POSITION UNDER THESE CONDITIONS. THE BELT DID NOT FALL ON EITHER OCCASION.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department  
of Transportation

National Highway  
Traffic Safety  
Administration

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

Official Business  
Penalty for Private Use \$300

**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

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**VEHICLE  
OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

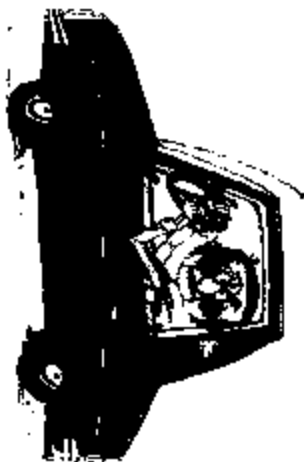
TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**  
**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



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