



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 241

Date Received 01-APR-2005 Repository

Reference No: 7: 50  
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**OWNER INFORMATION (Type or Print)**

Name \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Address \_\_\_\_\_ Evening Telephone Number \_\_\_\_\_  
City ATLANTA State GA Zip Code \_\_\_\_\_

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 4/11/05

**VEHICLE INFORMATION**

T1 eight vehicle identification number located at top of windshield on driver's side: 3C3EL65HXY7 Make: CHRYSLER Model: SEBRING CONVERTIBL Model Year: 1997  
Date Purchased: Aug 97 Dealer's Name and Telephone Number: T RONCALLE MOTORS Engine: \_\_\_\_\_ Fuel Type: Gas  
Original Owner:  Dealer's City: ROSWELL, GA State: GA Zip Code: \_\_\_\_\_  
Transmission Type: AUTOMATIC  Antilock Brakes Powertrain: REAR WHEEL DRIVE Vehicle Component Code: 070000 FUEL SYSTEM, GASOLINE  
 Cruise Control Multiple Failure: 2

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

Incident Date(s): 15-AUG-2003 Failure Mileage: 30000 Failure Speed: \_\_\_\_\_

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

Tire Make: \_\_\_\_\_ Tire Model (Name or Number): \_\_\_\_\_ Tire Size (Example P216/66R16): \_\_\_\_\_  
DOT No. (Example: DOTM19ABC038): \_\_\_\_\_  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(es).)

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(es).  
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).

**STRONG GASOLINE ODORS CAME INTO VEHICLE FROM THE OUTSIDE WHEN DRIVERS SIDE WINDOW WAS DOWN. VEHICLE HAD BEEN TO THE DEALER ON TWO SEPARATE OCCASIONS, AND THEY WERE UNABLE TO LOCATE THE CAUSE OF THE PROBLEM.\*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 what her 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)

PAINT ON CAR FADING - TURNING BLACK TO WHITE

INSIDE REAR VIEW MIRROR - NOT ABLE TO SEE BACK OF CAR

SEAT BELT ON PASSENGER SIDE - RETAINER BROKEN

PASSENGER LEATHER SEAT CRACKING

STITCHING ON CONVERTIBLE TOP COMING OUT

CAR HAS 50,000 MILES - ALWAYS DEALER SERVICED -  
I HAVE ALL RECORDS - TORN CAR - GARNISHED WHEN  
NOT IN USE --

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**

FIRST CLASS PERMIT NO 73175 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

**1-888-DASH-2-DOT**

**1-888-327-4236**

DOT Auto Safety Hotline (DASH) 2 DOT



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[www.nhtsa.dot.gov/online](http://www.nhtsa.dot.gov/online)