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

2006 OCT 30 PM 2:15

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
11-OCT-2006	Reference No. 10170490

OWNER INFORMATION (Type or Print)

Name	Daytime Telephone Number	E-mail Address
Address	Evening Telephone Number	
City STATESVILLE	State NC	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 au[redacted]ss to the vehicle manufacturer.
Signature of Owner [redacted] Date 10/19/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
2C8GM6842[redacted]	CHRYSLER	PACIFICA	2004

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
01-OCT-04	DIXIE JEEP EAGLE			No: Cylinders 6	Gas
Original Owner ☐ NO	Dealer's City STATESVILLE	State NC	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain FRONT WHEEL DRIVE	142000 AIR BAGS:SIDE/WINDOW Passenger Side Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
08-OCT-2006	47000	55	Caused vehicle to jerk off road to right with enough force to push me over to passenger side

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

DT*: THE CONTACT STATED WHILE DRIVING 55 MPH ON THE HIGHWAY, THE PASSENGER SIDE CURTAIN AIR BAG DEPLOYED WITHOUT WARNING. THE VEHICLE STALLED AND RESTARTED. IT WAS DRIVEN TO THE DEALER WHO HAD NOT DETERMINED THE CAUSE OF THE DEPLOYMENT.

Three year old child seat is on passenger side. (On the way to pick her up) I cannot imagine to effect on her had she actually been sitting in the car seat when the air bags exploded; Chrysler is repairing vehicle.

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.