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

2008 MAR -4 PM 12:18

FOR AGENCY USE ONLY 100148	
Date Received 24-JAN-2008	Repository ☐
	Reference No. 10215874

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address [redacted]
Address [redacted]		Evening Telephone Number [redacted]	
City LOUISVILLE	**State** KY	**Zip Code** [redacted]	

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 [redacted] Date 2/21/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1C3AN69L44[redacted]	CHRYSLER	CROSSFIRE	2004

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
01-JUN-07	SAM SWOPE INFINITI 502-499-5070			No: Cylinders 6	Gas
Original Owner ☐	Dealer's City LOUISVILLE	State KY.	Zip Code 40299		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain REAR WHEEL DRIVE	180000 VEHICLE SPEED CONTROL Multiple Failure: 8

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-AUG-2007	32000	5	

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	0	0	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).

TL*THE CONTACT OWNS A 2004 CHRYSLER CROSSFIRE. WHILE DRIVING BETWEEN 5-60 MPH, THE VEHICLE WOULD NOT ACCELERATE WHEN THE ACCELERATOR PEDAL WAS DEPRESSED. THE VEHICLE WOULD NOT ACCELERATE WITHOUT WARNING. THE CONTACT PULLED OVER AND WAS RESTARTED. THE FAILURE STOPPED AFTER THE VEHICLE WAS RESTARTED. THE FAILURE OCCURRED INTERMITTENTLY. THE DEALER WAS UNABLE TO DUPLICATE OR REPAIR THE FAILURE. THE FAILURE MILEAGE WAS 32,000 AND CURRENT MILEAGE WAS 34,150.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

CAR LOSES THROTTLE RESPONSE, ENGINE DID NOT STOP IT STAYED AT IDLE. PRESSING ON GAS PEDAL HAD NO EFFECT, SHUTTING ENGINE OFF AND RESTARTING WOULD RESTORE NORMAL OPPERATION TEMPORARLY, CHECK ENGINE CAME ON 1ST TIME, DEALER DIAGNOSED OXYGEN SENSOR REPLACED SENSOR, PROBLEM REACCURD 6 ORT TIMES, TOOK CAR TO DIFFERENT CHRYSLER DEALER THEY DIAGNOSED ACCELERATOR PEDEL SENSOR, THEY HAD TO ORDER PART, CAR OUT OF SERVICE 2WKS CALLED CHRYSLER THEY PAID FOR PART CUSTOMER PAID FOR LABOR, PROBLEM SEEM'S TO BE SOLVED

ATTACH ADDITIONAL SHEETS IF NECESSARY

[redacted]

U.S. Department of Transportation

National Highway Traffic Safety Administration

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use $300

LOUISVILLE KY 402

25 FEB 2008 PM 4 T

"LET US DARE TO READ, THINK, SPEAK AND WRITE." John Adams, 1776

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