



**NOV 2 2009**  
 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 100148

Date Received: 20-AUG-2009  
 Repository:   
 Reference No.: 10281190

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]  
 Address: [REDACTED]  
 City: OCOEE State: FL Zip Code: [REDACTED]  
 Daytime Telephone Number: [REDACTED] E-mail Address:  
 Evening Telephone Number:

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 2C3HE66G62H [REDACTED]  
 Make: CHRYSLER Model: 300M Model Year: 2002  
 Date Purchased: Dealer's Name and Telephone Number: Engine: No: Cylinders: Fuel Type:  
 Original Owner:  Dealer's City: State: Zip Code:  
 Transmission Type:  Antilock Brakes  Cruise Control Powertrain: Multiple Failure: Incident Date(s): 15-AUG-2009

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

Vehicle Component Code: 220000 SEATS Failure Mileage: 71934 Failure Speed:

**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:  Yes  No Fire:  Yes  No  
 Number of Persons Injured: Number of Deaths: Reported to Police: 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 2002 CHRYSLER 300M. WHILE ENTERING THE DRIVERS SEAT, IT EXTENDED TO THE REAR SEAT. THE CONTACT OBSERVED THAT THE SEAT ADJUSTER WAS BROKEN. THE DEALER STATED THAT THERE WERE NO RECALLS; HOWEVER, IT COULD BE REPAIRED AT THE OWNERS EXPENSE. THE FAILURE AND CURRENT MILEAGES WERE 71934.

*no police or fire report filed. See attached! OVER*

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)**

My husband [redacted] & son- [redacted] got into the car at Best Buy to come home and while my husband was ready to back up from the parking spot, the "drivers' seat" completely fell back on him. Thankfully, he was not driving, ~~or~~ because he could've ~~crashed~~ lost control of the car & possibly crashed. We were "very" fortunate that did not happen!! We want Orlando Dodge to reimburse us for these costs. Thank you

ATTACH ADDITIONAL SHEETS IF NECESSARY

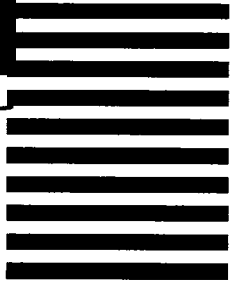
U.S. Department of Transportation  
National Highway Traffic Safety Administration  
1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382  
Official Business  
Penalty for Private Use \$300

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

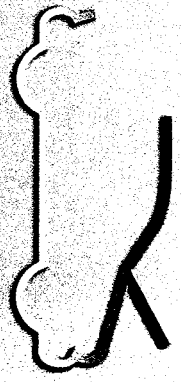
**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-210  
1200 New Jersey Avenue SE.  
Washington, D.C. 20077-9382**



**Think your vehicle has a safety defect?**



**If so:  
Use the enclosed form to file a report.**

**or visit:  
www.safercar.gov**

**or call:  
Vehicle Safety Hotline  
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)  
U.S. Department of Transportation  
National Highway Traffic Safety Administration



# Orlando Dodge Chrysler Jeep

4101 W. COLONIAL DRIVE  
ORLANDO, FL 32808  
(407) 299-1120  
FAX 407-299-2453

## FIVE STAR



CHRYSLER

Jeep

STATE OF FLORIDA REGISTRATION # MV05385

CELL: [REDACTED]

CUSTOMER NO. <b>975605</b>	ADVISOR <b>RON RAU</b>	4546	TAG NO. <b>2632</b>	INVOICE DATE <b>08/21/09</b>	INVOICE NO. <b>DOCS272790</b>
[REDACTED]	LABOR RATE	[REDACTED]	MILEAGE <b>71,934</b>	COLOR <b>DK BROWN/</b>	STOCK NO. <b>283194</b>
<b>OCOE, FL</b>	YEAR / MAKE / MODEL <b>02/CHRYSLER/300M/4 DOOR SEDAN</b>			DELIVERY DATE <b>06/22/02</b>	DELIVERY MILES <b>13,927</b>
	VEHICLE I.D. NO. <b>2 C 3 H E 6 6 G 6 2 H</b>			SELLING DEALER NO. <b>U/C/D</b>	PRODUCTION DATE <b>06/14/02</b>
	F.T.E. NO.		P.O. NO.	R.O. DATE <b>08/17/09</b>	
COMMENTS					<b>MO: 71936</b>

**LABOR & PARTS**  
**J# 1 40DOZ**      **BRAKES**      **TECH(S): 2300**      **130.00**  
 CUSTOMER STATES THAT :  
 CHECK BRAKES AND ADVISE  
 FRONT PADS LOW.  
 REPLACED FRONT PADS AND RESSURFACED FRONT ROTORS.

**SHOP SUPPLIES AND HAZARDOUS WASTE DISPOSAL CHARGES**  
 This charge represents costs and profits to the motor vehicle repair facility for items such as miscellaneous shop supplies and/or waste disposal. [F/S 559.905(1) (h)]

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 1	1	V1013034-AC	PAD KIT F 5003005	67.65
<b>JOB # 1 TOTAL PARTS</b>				<b>67.65</b>
<b>JOB # 1 TOTAL LABOR &amp; PARTS</b>				<b>197.65</b>

**J# 2 02DOZ51**      **\*LOF 5W30 5 QTS**      **TECH(S): 2300**      **10.50**  
 CUSTOMER REQUESTS LUBE OIL AND FILTER SERVICE  
 CHECK AIR FILTER, CHECK TIRE PRESSURE AND TOP OFF FLUIDS  
 ?  
 PERFORMED LUBE OIL AND FILTER SERVICE CHECKED AIR FILTER  
 TIRE PRESSURE AND TOP OFF FLUIDS

SUPPLIES: 10% of the parts and labor charge is included for supplies used on your vehicle. Such items as tape, pins, aerosprays, solvent, rags, towels, solder, wire, sealer, and etc., are covered by this charge.  
 The State of Florida requires a \$1.00 fee to be collected for each new tire sold in the state [s. 403.718], and a \$1.50 fee to be collected for each new or remanufactured battery sold in the state [s. 403.7185].

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 2	1	5281090	FILTER EN 9057006	2.85
JOB # 2	5	68026604-AA	OIL 1081090	1.32
<b>JOB # 2 TOTAL PARTS</b>				<b>4.17</b>
<b>JOB # 2 TOTAL LABOR &amp; PARTS</b>				<b>14.33</b>

**ALL PARTS NEW UNLESS OTHERWISE SPECIFIED**  
**12 MONTHS/12,000 MILES WARRANTY ON ALL PARTS AND LABOR UNLESS OTHERWISE SPECIFIED.**

**J# 3 04DOZ03A**      **23 POINT SPECIAL**      **TECH(S): 2300**      **9.00**  
 CUSTOMER REQUESTS 23 POINT INSPECTION PER COUPON  
 CHECKED TIRE PRESSURES, BRAKES, SUSPENSION, EXHAUST, BATTERY  
 LAMPS, FLUIDS, BELTS, HOSES, COOLING SYST, WIPERS, AIR FILTER  
 PERFORMED 23 POINT INSPECTION. LOP CODE 04DOZ03A

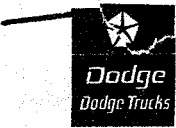
**DISCLAIMER OF WARRANTIES**  
 LIMITED WARRANTY: THE ONLY WARRANTIES APPLYING TO THE PART(S) PURCHASED OR INSTALLED IN ACCORDANCE WITH THIS ESTIMATE ARE THOSE THAT MAY BE OFFERED BY THE MANUFACTURER. THE SELLER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES, EITHER EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND NEITHER ASSUMES NOR AUTHORIZES ANY OTHER PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF PRODUCTS OR SERVICE SOLD UNDER THE TERMS OF THIS ESTIMATE. PARTS AND LABOR ARE GUARANTEED AS PER THE INDIVIDUAL MANUFACTURER'S POLICY. SELLER DOES NOT GUARANTEE THAT THE WORK PERFORMED IN ACCORDANCE WITH THIS ESTIMATE WILL CORRECT ANY PROBLEM SPECIFIED ON THE DESCRIPTION OF THE COMPLAINT. THERE ARE NO WARRANTIES WHICH EXTEND BEYOND THE DESCRIPTION ON THE FACE HEREOF.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
<b>JOB # 3 TOTAL PARTS</b>				<b>0.00</b>
<b>JOB # 3 TOTAL LABOR &amp; PARTS</b>				<b>9.00</b>

**J# 4 60DOZ**      **INTERIOR TRIM**      **TECH(S): 2300**      **225.00**  
 CUSTOMER STATES THAT :  
 THE LEFT FRONT SEAT BACK FELL  
 SEAT ADUSTER BROKEN.  
 REPLACED DRIVER FRONT SEAT ADUSTER.

PARTS	QTY	FP-NUMBER	DESCRIPTION	UNIT PRICE
JOB # 4	1	5096056-AA	ADJUSTER 23047007	471.45
<b>JOB # 4 TOTAL PARTS</b>				<b>471.45</b>
<b>JOB # 4 TOTAL LABOR &amp; PARTS</b>				<b>696.45</b>

MISC	CODE	DESCRIPTION	CONTROL NO
JOB # A	SS	SHOP SUPPLIES	19.00
JOB # 1	CPS	COUPON SVC	-4.50
JOB # 1	CPP	COUPON PARTS	-4.50



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ORLANDO, FL 32808  
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## Jeep

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	F.T.E. NO.	P.O. NO.	P.O. DATE <b>08/17/09</b>		
COMMENTS					<b>MO: 71936</b>

TOTAL - MISC 10.00

COMMENTS-----  
WAITER

TOTALS-----

\*\*\*\*\*  
\* [ ] CASH [ ] CHECK CK NO. [ ] \*  
\* [ ] VISA [ ] MASTERCARD [ ] DISCOVER \*  
\* [ ] OTHER [ ] CHARGE \*  
\*\*\*\*\*

TOTAL LABOR... 374.50  
TOTAL PARTS... 548.55  
TOTAL SUBLET... 0.00  
TOTAL G.O.G... 0.00  
TOTAL MISC CHG. 19.00  
TOTAL MISC DISC -9.00  
TOTAL TAX..... 60.65

**TOTAL INVOICE \$ 993.70**

THANK YOU FOR YOUR BUSINESS!!

CUSTOMER SIGNATURE

**PAID**  
**CHK [REDACTED]**  
**AUG 20 2009**  
**DAK**  
**ORLANDO DODGE INC**

### SHOP SUPPLIES AND HAZARDOUS WASTE DISPOSAL CHARGES

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The Reynolds and Reynolds Company EPRINTS114E C0615754 Q (05/06)

ENTERPRISE LEASING COMPANY OF ORLANDO, 4442 W COLONIAL DR, ORLANDO, FL 328088116 (407) 297-0319

RENTAL AGREEMENT  
606011

REF#  
5VS649

SUMMARY OF CHARGES

RENTER

DATE & TIME OUT  
08/17/2009 05:30 PM  
DATE & TIME IN  
08/21/2009 02:40 PM

BILLING CYCLE  
24-HOUR

VEH #1 2009 HYUN ELAN 4GLS  
VIN# KMHDU46D19U  
LIC#  
MILES DRIVEN 49

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	08/17 - 08/21	4	DAY	\$52.99	\$211.96
REFUELING CHARGE	08/17 - 08/21				\$0.00
<b>Subtotal:</b>					<b>\$211.96</b>

Taxes & Surcharges					
FL STATE SALES TAX	08/17 - 08/21			6.5%	\$14.39
RENTAL CAR SURCHARGE	08/17 - 08/21	4	DAY	\$2.01	\$8.04
VLF REC - VEHICLE LICENSE FEE	08/17 - 08/21	4	DAY	\$0.35	\$1.40
<b>Total Charges:</b>					<b>\$235.79</b>

Bill-To / Deposits	
DEPOSITS	(\$499.81)

**Total Amount Due \$0.00**

AMOUNT PAID	TYPE
(\$264.02)	Visa
\$499.81	Visa

CREDIT CARD NUMBER  
XXXXXXXXXXXX  
XXXXXXXXXXXX

Also, please reimburse by Orlando Dodge Chrysler Jeep this amount \$235.79 for a rental car we had to use during that time!  
Thank you,

9-20-09.



U.S. Department  
of Transportation  
**National Highway  
Traffic Safety  
Administration**

1200 New Jersey Avenue SE  
Washington, DC 20590

Dear Consumer:

NVS-216fb

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failures(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief  
Correspondence Research Division  
Office of Defects Investigation  
Enforcement

Enclosure: VOQ

