



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
JUN 15 2011
 26-APR-2011

Repository
 Reference No.
 10397924

OWNER INFORMATION (Type or Print)

Name [REDACTED]
 Address [REDACTED]
 City **CARROLL** State **IA** Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
 Evening Telephone Number [REDACTED]

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
2D8HN44E29R [REDACTED] Make **DODGE** Model **GRAND CARAVAN** Model Year **2009**
 Date Purchased [REDACTED] Dealer's Name and Telephone Number [REDACTED] Engine: [REDACTED] Fuel Type: [REDACTED]
 Original Owner Dealer's City [REDACTED] State [REDACTED] Zip Code [REDACTED]
 Transmission Type Antilock Brakes Cruise Control Powertrain [REDACTED] Multiple Failure: [REDACTED] Incident Date(s) **16-FEB-2011**

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: **190000 TIRES** Failure Mileage **47000** Failure Speed [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]
 DOT No. (Example: DOTM19ABC036) Original Equipment Prior Repair Failure Location: [REDACTED]
 Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
 Seat Type: [REDACTED] Installation System: [REDACTED]
 Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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 [REDACTED] Number of Deaths [REDACTED] 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 2009 DODGE GRAND CARAVAN. THE CONTACT STATED THAT TWO OF THE VALVE STEMS DETERIORATED AND CAUSED THE CAP TO FRACTURE FROM THE VEHICLE. THE VEHICLE WAS TAKEN TO A LOCAL REPAIR STATION WHERE THE FIRST VALVE STEM WAS REPLACED FEBRUARY 2011. THE SECOND FAILURE OCCURRED ON APRIL 2011 AND THE SECOND VALVE STEM WAS REPAIRED AT THE SAME REPAIR STATION. THE CONTACT CALLED AN AUTHORIZED DEALER WHO OFFERED NO ASSISTANCE. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE CURRENT MILEAGE WAS APPROXIMATELY 49,000 AND THE FAILURE MILEAGE WAS APPROXIMATELY 47,000.

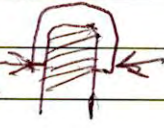
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

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)

on the two tire stem failures I had. The stem corroded where the cap toped about on *stir area*



ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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

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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



Dedham Tire & Auto Repair Inc.

04/29/2011

201 S 4th Ave Box 18
Dedham, IA, 51440
712-683-5522
The Tire Shop

Invoice #9456

Maple River IA

2009 DODGE CARAVAN -GRAND CARAVAN
3.3L MULTIPORT FI
Tag: Mileage 47,028
ID: 2D84N44E29R

<u>Labor</u>			<u>Amount</u>
INSTALL SENSOR ON RIM	1		\$16.80
			\$16.80

<u>Part No.</u>	<u>Parts</u>	<u>Quantity</u>	<u>Each</u>	
68078768AA	SENSOR	1.00	\$85.64	\$85.64
				\$85.64

<u>Service charges</u>			
HAZARDOUS WASTE FEE			\$0.00
			\$0.00

<u>Subtotal</u>	\$102.44
<u>Tax</u>	\$7.17
<u>Total</u>	\$109.61

***** Thank You For Your Business *****
 BUSINESS HOURS 7:30am TO 5:00pm MON THRU FRI & SAT. 7:30 TO 12:00

4/30/2011

Dedham Tire & Auto Repair Inc.

201 S 4th Ave Box 18

Dedham, IA, 51440

712-683-5522

The Tire Shop

Statement April - 2011

Maple River IA

Account # 51

Payments

Date		Amount
04/04/2011	Payment Received CASH	\$26.70

Charges

Date	Invoice #	Description	Amount
04/29/2011	9456	SENSOR	\$109.61
04/30/2011	9468	RT REAR TIRE REPAIR	\$20.33

Previous Balance	\$26.70
Total Charges	\$129.94
Total Payments	\$26.70
Balance Due	\$129.94

Your account balance is due by the 10th of the month.

Thank you for your business.