


APR 22 2014

 <b>DOT Auto Safety Hotline</b> <b>Vehicle Owner's Questionnaire</b> <b>To Report Vehicle Safety Defects</b> <b>1-888-DASH-2-DOT</b> <b>(1-888-327-4236)</b> <b>INTERNET: www.nhtsa.dot.gov/hotline</b>				FOR AGENCY USE ONLY 100148	
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 12-FEB-2014	
				Repository <input type="checkbox"/>	
				Reference No. 10563974	
<b>OWNER INFORMATION (Type or Print)</b>					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
BRISOL		IN			
Zip Code					
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).					
<b>VEHICLE INFORMATION</b>					
17 digit vehicle identification number located at bottom of windshield on driver's side		Make		Model	
2D4GP44L43R		DODGE		GRAND CARAVAN	
Model Year		Engine:		Fuel Type:	
2003		3.8L		UNLEADED	
No: Cylinders		6			
Date Purchased		Dealer's Name and Telephone Number		State	
		GIFT FROM FATHER		MI	
Original Owner		Dealer's City		Zip Code	
<input type="checkbox"/>				78088	
Transmission Type		Powertrain		Multiple Failure:	
AUTOMATIC					
<input checked="" type="checkbox"/> Antilock Brakes		Incident Date(s)		04-FEB-2014	
<input checked="" type="checkbox"/> Cruise Control					
<b>FAILED COMPONENT(S)/PART(S) INFORMATION</b>					
Vehicle Component Code: 100000 POWER TRAIN				Failure Mileage	
				65000	
				Failure Speed	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE</b>					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment		Failure Location:	
		<input type="checkbox"/> Prior Repair			
Tire Component Code				Tire Failure Type:	
<b>ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE</b>					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
<b>APPLICABLE INCIDENT INFORMATION</b> (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash		Fire		Number of Persons Injured	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		0	
				Number of Deaths	
				0	
				Reported to Police	
				N	
<b>Narrative Description of Incident(S), Crash(es), and Injury(ies).</b> 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 2003 DODGE GRAND CARAVAN. THE CONTACT STATED THAT WHILE TRAVELING VARIOUS SPEEDS, THE VEHICLE ERRONEOUSLY ACCELERATED. THE VEHICLE WAS TAKEN TO A PRIVATE MECHANIC WHERE IT WAS FOUND THAT THE TRANSMISSION CONTROL MODULE HAD FAILED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS CONTACTED ABOUT THE FAILURE. THE FAILURE MILEAGE WAS APPROXIMATELY 65,000.					
CODE P1776 TSB: 21-004-06					
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.					