

OCT 2- 2014

 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 08-AUG-2014	Repository ☐ Reference No. 10620852
OWNER INFORMATION (Type or Print)			
Name [REDACTED]		Daytime Telephone Number [REDACTED]	
Address [REDACTED]		E-mail Address NOEMAIL@UNK.GOV	
City HOLLY LAKE RANCH	State TX	Zip Code [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 1D4GP44L27R [REDACTED]		Make DODGE	Model Year 2007
Date Purchased 9/24/2008	Dealer's Name and Telephone Number LONG STAR Dodge		Engine: No: Cylinders 6
Original Owner ☐	Dealer's City Mincola, IL	State TX	Fuel Type: GAS
Transmission Type Automatic	☒ Antilock Brakes ☒ Cruise Control	Powertrain Standard	Incident Date(s) 05-AUG-2014
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Codes: BRAKES (PWS), 180000 VEHICLE SPEED CONTROL		Failure Mileage 62000	Failure Speed 30
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE			
Tire Make	Tire Model (Name or Number) N/A	Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)	☐ Original Equipment ☒ Prior Repair	Failure Location:	
Tire Component Code	Tire Failure Type:		
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE			
Make:	N/A	Date Manufactured:	Model No./Name:
Seat Type:	N/A	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 0	Number of Deaths 0
		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 2007 DODGE CARAVAN. THE CONTACT STATED WHILE DRIVING 30 MPH THE VEHICLE ACCELERATED AND THE ABS BRAKE SYSTEM FAILED TO ENGAGE. THERE WERE NO WARNING LIGHTS ILLUMINATED ON THE INSTRUMENT PANEL. THE CONTACT SHIFTED THE VEHICLE TO A LOWER GEAR IN ORDER TO SLOW THE VEHICLE DOWN. THE CONTACT WAS FORCED TO PLACE THE VEHICLE IN REVERSE GEAR IN ORDER TO STOP THE VEHICLE. THE VEHICLE WAS DRIVEN ONTO THE EMERGENCY LANE AND TURNED OFF. WHEN THE CONTACT RESTARTED THE VEHICLE THE FAILURE RECURRED. THE MANUFACTURER WAS NOTIFIED OF THE DEFECT BUT DID NOT PROVIDE A REMEDY. A LOCAL MECHANIC DIAGNOSED THE FAILURE AND CONFIRMED THAT IT WAS AN ABS HYDRAULIC CONTROL FAILURE. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 62,000. THE VIN WAS NOT PROVIDED.			
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.			