

FEB 13 2015

**INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)**



U.S. Department of Transportation

National Highway Traffic Safety Administration

**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: 02-JAN-2015

Repository:

Reference No.: 10669683

**OWNER INFORMATION (Type or Print)**

Name: [REDACTED]

Address: [REDACTED]

City: GROSS POINTE PARK      State: MI      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: 2C4RC1BG7DR [REDACTED]

Make: CHRYSLER      Model: TOWN AND COUNTRY      Model Year: 2013

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: [REDACTED]       Antilock Brakes      Powertrain: [REDACTED]      Multiple Failure: [REDACTED]      Incident Date(s): 02-JAN-2015

Cruise Control

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

Vehicle Component Code: 110000 ELECTRICAL SYSTEM

Failure Mileage: [REDACTED]      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: DOTM9ABC036): [REDACTED]       Original Equipment      Failure Location: [REDACTED]

Prior Repair

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: 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 2013 CHRYSLER TOWN AND COUNTRY. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 14V234000 (ELECTRICAL SYSTEM); HOWEVER, THE PART TO DO THE REPAIR WAS UNAVAILABLE. THE MANUFACTURER WAS NOTIFIED OF THE ISSUE. THE VEHICLE'S REAR QUARTER VENT WINDOWS WERE DISABLED BY THE DEALER UNTIL THE PARTS BECAME AVAILABLE. THE CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE CONTACT HAD NOT EXPERIENCED A FAILURE.

FIXED IN MID JAN 2015

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.