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	Repository ☐
05-FEB-2015	Reference No. 10681499

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	
City LAKE GROVE	State NY	Zip Code [redacted]	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	Make	Model	Model Year
2C4RC1BG8CR[redacted]	CHRYSLER	TOWN AND COUNTRY	2012

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
12/30/2011	NAPLETON CLERMONT			6	GAS
Original Owner ☑	Dealer's City CLERMONT	State FL	Zip Code 34711		

Transmission Type		Powertrain	Multiple Failure:	Incident Date(s)
AUTO	☑ Antilock Brakes ☑ Cruise Control			05-APR-2014

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 110000 ELECTRICAL SYSTEM	Failure Mileage	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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No	0	0	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 2012 CHRYSLER TOWN AND COUNTRY. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 14V234000 (ELECTRICAL SYSTEM). THE CONTACT STATED THAT THE PART WAS NOT AVAILABLE FOR THE REPAIR. AS AN INTERIM REPAIR, THE DEALER DISCONNECTED THE REAR QUARTER VENT WINDOW SWITCH. THE DEALER DID NOT GIVE A SPECIFIC DATE FOR WHEN THE PART WOULD BECOME AVAILABLE. THE MANUFACTURER WAS NOTIFIED. THE CONTACT HAD NOT EXPERIENCED A FAILURE.

STILL WAITING FOR PART AT LEAST 9 MONTHS!

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY