


APR 27 2015

 <p>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</p>		FOR AGENCY USE ONLY 100148 Date Received 09-MAR-2015 Repository <input type="checkbox"/> Reference No. 10692967	
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	E-mail Address
Address		Evening Telephone Number	NO
City FREMONT	State NE	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).			
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2C4RC1BG3DR		Make CHRYSLER	Model TOWN AND COUNTRY
		Model Year 2013	
Date Purchased 7/1/2013	Dealer's Name and Telephone Number Jean Shubbe Chrysler + Dodge		Engine: No. Cylinders 8
Original Owner yes <input checked="" type="checkbox"/>	Dealer's City Fremont Neb	State Neb	Zip Code 68025
Transmission Type avout.	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain Real End	Multiple Failure:
<input checked="" type="checkbox"/> Cruise Control			Incident Date(s) 01-JAN-2015
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 110000 ELECTRICAL SYSTEM		Failure Mileage 5800	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: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0
			Reported to Police NO
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 STATED THAT NHTSA CAMPAIGN NUMBER: 14V234000 (ELECTRICAL SYSTEM) HAD EXCEEDED A REASONABLE AMOUNT OF TIME FOR REPAIR. THE DEALER STATED THAT THE PARTS NEEDED WERE NOT AVAILABLE FOR REPAIR. THE MANUFACTURER WAS NOT MADE AWARE OF THE DELAY. THE VEHICLE WAS NOT REPAIRED. THE CONTACT HAD NOT EXPERIENCED A FAILURE. <i>as of 7/15/15 K yet still no parts they tell me again + again</i>			
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.			