

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6) 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 22-JUL-2015 OCT 19 2015		Repository ☐ Reference No. 10735708	
OWNER INFORMATION (Type or Print)							
Name		Address		City		State	
[REDACTED]		[REDACTED]		MONROE		GA	
Zip Code		Evening Telephone Number		E-mail Address			
[REDACTED]		[REDACTED]		[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				Make		Model	
2C4RC1BG8CR [REDACTED]				CHRYSLER		TOWN AND COUNTRY	
Date Purchased		Dealer's Name and Telephone Number				Engine:	
[REDACTED]		[REDACTED]				No: Cylinders	
Original Owner		Dealer's City		State		Zip Code	
[REDACTED]		Atlanta		Ga		[REDACTED]	
Transmission Type		Antilock Brakes		Powertrain		Incident Date(s)	
[REDACTED]		☐		+ decp		01-JUL-2014	
Cruise Control		☐		Multiple Failure:			
[REDACTED]		☐		[REDACTED]			
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Code: 110000 ELECTRICAL SYSTEM						Failure Mileage	
[REDACTED]						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)		☐ Original Equipment		☐ Prior Repair			Failure Location:
Tire Component Code		Tire Failure Type:					
[REDACTED]		[REDACTED]					
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:					
[REDACTED]		[REDACTED]					
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	
☐ Yes ☒ No		☐ Yes ☒ No		0		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 2012 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 CONTACT STATED THAT THE MANUFACTURER EXCEEDED A REASONABLE AMOUNT OF TIME FOR THE RECALL REPAIR. THE MANUFACTURER WAS MADE AWARE OF THE ISSUE. THE CONTACT HAD NOT EXPERIENCED A FAILURE.							
<i>This was finally taken care of 8/24/15</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.							