

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) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148			
		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Date Received</td> <td style="width: 50%;">Repository ☐</td> </tr> <tr> <td style="text-align: center;">24-JUL-2015 SEP 22 2015</td> <td style="text-align: center;">Reference No. 10736231</td> </tr> </table>		Date Received	Repository ☐
Date Received	Repository ☐						
24-JUL-2015 SEP 22 2015	Reference No. 10736231						
OWNER INFORMATION (Type or Print)							
Name		Address		City			
[REDACTED]		[REDACTED]		[REDACTED]			
State		Zip Code		E-mail Address			
FL		[REDACTED]		[REDACTED]			
Daytime Telephone Number		Evening Telephone Number					
[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			
2C4RC1CG5CR [REDACTED]		CHRYSLER		TOWN AND COUNTRY			
Model Year		Engine:		Fuel Type:			
2012		No: Cylinders		GAS			
Date Purchased		Dealer's Name and Telephone Number		Engine:			
11/2011		ARRIGO		No: Cylinders			
Original Owner		Dealer's City		State			
☒		WEST PALM BEACH		FL			
Transmission Type		Powertrain		Multiple Failure:			
6-speed Auto.		[REDACTED]		[REDACTED]			
☐ Antilock Brakes		☒ Cruise Control		Incident Date(s)			
				11-JUN-2014			
FAILED COMPONENT(S)/PART(S) INFORMATION							
Vehicle Component Code: 110000 ELECTRICAL SYSTEM				Failure Mileage			
HAVE NOT HAD PROBLEM YET BUT HAVE BEEN TRYING TO GET PART REPLACED FOR OVER ONE YEAR.				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:					
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			
☐ Yes ☒ No		☐ Yes ☒ No		0			
Number of Deaths		Reported to Police					
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); 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.							
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.							

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

THIS IS IN REFERENCE TO A SAFETY-RECALL. They mention
THAT IT MAY CAUSE A FIRE. THEY SENT THE FIRST NOTICE
AROUND JUNE OF 2014 AND THEY SAY THEY WILL CALL ME
WHEN THEY HAVE THE PART. THEY HAVE NEVER CALLED AND IT
HAS BEEN OVER A YEAR.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

**National Highway
Traffic Safety
Administration**

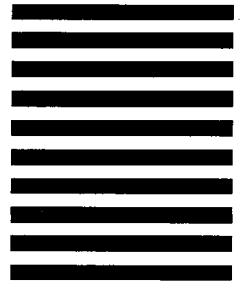
1200 New Jersey Avenue SE,
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

SEP 01 2015
11 33A
01 SEP '15
PM 7:1



**NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES**



BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1888

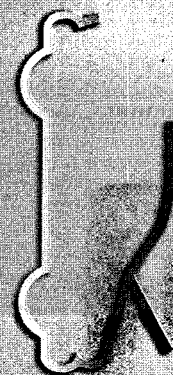
WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

**US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382**



**Think your vehicle
has a safety defect?**



If so:

**Use the enclosed
form to file a report.**

or visit:

www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration