

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(P)(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				Date Received 04-AUG-2015 SEP 21 2015	
OWNER INFORMATION (Type or Print) Name: [REDACTED] Address: [REDACTED] City: TRAVERSE State: MI Zip Code: [REDACTED]				Repository ☐	
				Reference No. 10746116	
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).				Daytime Telephone Number: [REDACTED] Evening Telephone Number: [REDACTED]	
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2A8HR54X09R [REDACTED]			Make CHRYSLER		Model TOWN AND COUNTRY
			Model Year 2009		
Date Purchased 12-9-13		Dealer's Name and Telephone Number Bill Marek 231-929-8935		Engine: No. Cylinders 4.0 V6	
Original Owner ☐		Dealer's City Traverse City		Fuel Type: gas	
Transmission Type auto		☒ Antilock Brakes ☒ Cruise Control Powertrain front wheel		Multiple Failure: Incident Date(s) 06-MAY-2015	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 110000 ELECTRICAL SYSTEM				Failure Mileage NA	
				Failure Speed NA	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make NA		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: NA		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 ☐ 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 2009 CHRYSLER TOWN AND COUNTRY. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 14V373000 (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 NOT NOTIFIED 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.					