

INFORMATION Redacted PURSUANT TO THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

EQ-10746283-2653

DOT Auto Safety Hotline

FOR AGENCY USE ONLY 100148

U.S. Department
of Transportation

Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT

Date Received

Repository

National Highway Traffic Safety

(1-888-327-4236)

05-AUG-2015

Reference No.10746283

Administration

INTERNET:www.nhtsa.dot.gov/hotline

OWNER INFORMATION (Type or Print)

Name [REDACTED] Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
Address [REDACTED]
City JEROME State ID [REDACTED] Zip Code [REDACTED] Evening Telephone Number [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 Model Year
3C3AY75S65T [REDACTED] CHRYSLER PT CRUISER CONVERT 2005

Date Purchased Dealer's Name and Telephone Number Engine: Fuel Type:
No: Cylinders 4
Original Owner Dealer's City State Zip Code

Transmission Type Antilock Brakes Powertrain Multiple Failure: Incident Date(s)
Cruise Control 01-JUL-2015

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 110000 ELECTRICAL SYSTEM, ENGINE (PWS), LIGHTING (PWS)
Failure Mileage Failure Speed
48000 0

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).

