

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		552(B)(6) USE ONLY 100148	
		Date Received: 18-AUG-2015		Repository ☐ Reference No. 10749467	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
ALCOLU		SC		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			Make		Model
2C4RDGCG4CR			DODGE		GRAND CARAVAN
Model Year			Engine:		Fuel Type:
2012			No: Cylinders		
Date Purchased		Dealer's Name and Telephone Number		Engine:	
11/06/2013		STOKES - CRAVEN - 433-5500		No: Cylinders	
Original Owner		Dealer's City		State	
☐		MANNING		S.C.	
Zip Code		29102			
Transmission Type		Antilock Brakes		Incident Date(s)	
☐		☐		05-AUG-2014	
Cruise Control		Powertrain		Multiple Failure:	
☐					
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Code: 110000 ELECTRICAL SYSTEM				Failure Mileage	
				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	
				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 DODGE GRAND CARAVAN. THE CONTACT RECEIVED NOTIFICATION OF NHTSA CAMPAIGN NUMBER: 14V234000 (ELECTRICAL SYSTEM) AND STATED THAT THE PART NEEDED WAS NOT AVAILABLE WITHIN A REASONABLE TIMEFRAME. THE DEALER DISCONNECTED THE REAR QUARTER VENT WINDOW SWITCH MONTHS AGO. THE DEALER DID NOT GIVE A SPECIFIC DATE FOR WHEN THE PART WOULD BECOME AVAILABLE. THE MANUFACTURER COULD NOT PROVIDE AN ESTIMATED DATE FOR WHEN THE VEHICLE WOULD RECEIVE THE RECALL REPAIR. 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.					