

INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)



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

FOR AGENCY USE ONLY 100148

Date Received	Repository <input type="checkbox"/>
04-SEP-2015	Reference No. 10761665
OCT 26 2015	

Daytime Telephone Number	E-mail Address
[REDACTED]	[REDACTED]
Evening Telephone Number	
AS ABOVE	

**OWNER INFORMATION (Type or Print)**

Name	[REDACTED]		
Address	[REDACTED]		
City	State	Zip Code	
RIVERHEAD	NY	[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
2C3HE66G72H [REDACTED]	CHRYSLER	300M	2002
Date Purchased	Dealer's Name and Telephone Number	Engine:	Fuel Type:
9/26/03	Private owner	No: Cylinders	99S
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code
			6
Transmission Type	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:
	<input checked="" type="checkbox"/> Cruise Control		yes - 3 so far
			Incident Date(s)
			03-SEP-2015

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Code: ENGINE (PWS)	Failure Mileage	Failure Speed
	75000	5

**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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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).

TL\* THE CONTACT OWNS A 2002 CHRYSLER 300M. WHILE DRIVING 5 MPH, THE ENGINE SHUT OFF AND RESTARTED AFTER A COUPLE OF MINUTES. THE ENGINE SHUT OFF WITHOUT WARNING. THE CONTACT PLACED THE GEAR INTO NEUTRAL AND COASTED THE VEHICLE TO THE SIDE OF THE ROAD. THE VEHICLE WAS RESTARTED AND TAKEN TO AN INDEPENDENT MECHANIC WHO WAS UNABLE TO DIAGNOSE THE FAILURE. THE CONTACT NOTIFIED THE MANUFACTURER OF THE FAILURE AND WAS INFORMED TO TAKE THE VEHICLE TO A LOCAL DEALER FOR DIAGNOSTIC TESTING. THE VEHICLE WAS NOT DIAGNOSED OR REPAIRED. THE FAILURE MILEAGE WAS 75,000.

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 to 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)**

car shut off about 3 months prior to last time. Traveling approx 65 mph on LIE (495) no dash lights or warning lights just shut off. coasted to shoulder until police came. Car restarted within minutes

6 months before above incident car shut off again on LIE (495) driving approx 60-65 Again no warning or dash lights. Again pulled to shoulder and restarted in approx 5 minutes.

ATTACH ADDITIONAL SHEETS IF NECESSARY

This vehicle is going to get me killed. It is not normal or vehicle do just shut off!! My car has recently for inspection they can't find out what problem is even when hooked to diagnostic machine. No codes come up

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

MID-ISLAND

NY 117

17 OCT '15

PM 1 L



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**



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