

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6) DOT Auto Safety Hotline		FOR AGENCY USE ONLY 100148	
 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	
		Date Received 29-MAR-2017 MAY 16 2017	Repository ☐ Reference No. 10969312
OWNER INFORMATION (Type or Print)			
Name		Daytime Telephone Number	
Address		Evening Telephone Number	
City	State	Zip Code	E-mail Address
HOWARD	OH		
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
2ABHR54169R		CHRYSLER	TOWN AND COUNTRY
Date Purchased	Dealer's Name and Telephone Number	Engine:	Model Year
3-2010	GOETZMAN CHR 740-397-6002	No: Cylinders 6	2009
Original Owner	Dealer's City	State	Fuel Type:
☒	MT VERNON	OH	GAS
Zip Code	Transmission Type	Antilock Brakes	Powertrain
43050	AUTO	☒	Multiple Failure:
	☒ Cruise Control		Incident Date(s)
			27-MAR-2017
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Codes: 060000 ENGINE (PWS), 110000 ELECTRICAL SYSTEM		Failure Mileage	Failure Speed
		144000	40
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	Number of Deaths
☐ Yes ☒ No	☐ Yes ☒ No		
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. WHILE DRIVING 40 MPH, THE VEHICLE STALLED WITHOUT WARNING. THE CONTACT STATED THAT THE ENGINE CUT OFF AND THE VEHICLE LOST COMPLETE ELECTRICAL POWER. THE DEALER REPLACED THE FUSE BENDAL AND THE LOAD MANAGEMENT COMPUTER. THE MANUFACTURER WAS NOT MADE AWARE OF THE FAILURE. THE FAILURE MILEAGE WAS 144,000. THE VIN WAS NOT AVAILABLE. PANEL			
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.			