



U.S. Department of Transportation
National Highway Traffic Safety Administration

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)
DOT Auto Safety Hotline

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

30-AUG-2017

OCT 25 2017

Repository ☐

Reference No.
11020541

OWNER INFORMATION (Type or Print)

Name

Address

City

State

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

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
2C4RDG6G2CR

Make

Model

Model Year

Date Purchased

Dealer's Name and Telephone Number

Engine:
No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

☐ Antilock Brakes

☐ Cruise Control

Powertrain

Multiple Failure:

Incident Date(s)
15-JUN-2016

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS

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

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

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 STATED THAT THE AIR BAG WARNING LIGHT ILLUMINATED. THE VEHICLE WAS TAKEN TO STOKES AUTOMOTIVE LOCATED AT 86 PEACH TOWER RD, CLANTON, AL 35045 (205) 351-4382 TO BE SERVICED UNDER NHTSA CAMPAIGN NUMBER: 17V376000 (AIR BAGS) BUT THE REMEDY FAILED TO REPAIR THE VEHICLE. THE CONTACT MENTIONED THAT THE AIR BAG WARNING LIGHT REMAINED ILLUMINATED AFTER THE RECALL REPAIR. THE CONTACT SPOKE TO A THE SERVICE MANGER WHOM INFORMED HIM THAT THE AIR BAG WARNING LIGHT FAILURE WAS NOT A PART OF THE RECALL. THE FAILURE WAS NOT DIAGNOSED OR REPAIRED. THE MANUFACTURER NOT NOTIFIED OF THE FAILURE. THE FAILURE MILEAGE WAS UNKNOWN.

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.