



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

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

Repository ☐

02-NOV-2017

Reference No.
11042495

Daytime Telephone Number

E-mail Address

Evening Telephone Number

OWNER INFORMATION (Type or Print)

Name

Address

City

ABERDEEN

State

MD

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
2C4RC1BG4FR

Make
CHRYSLER

Model
TOWN AND COUNTRY

Model Year
2015

Date Purchased

Dealer's Name and Telephone Number

Engine:
No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Flex
85

Transmission Type

☐ Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)
01-JAN-2016

☐ Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 120000 LIGHTING (PWS) Low Beam Light only giving 20yd. or light or unlit roads, any thing entering road before, when seen no time to stop before hitting it if person they would be killed

Failure Mileage
500

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

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

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 2015 CHRYSLER TOWN AND COUNTRY. WHILE DRIVING AT NIGHT ON AN UNLIT ROAD, THE HEADLAMPS FAILED TO ILLUMINATE THE ROADWAY SUFFICIENTLY. THE VEHICLE WAS NOT TAKEN TO A DEALER TO BE DIAGNOSED. THE CONTACT WAS CONCERNED THAT THERE WAS AN OBJECT INSIDE OF THE HEADLAMP THAT PROHIBITED THE PROPER PROJECTION OF THE HEADLAMP BEAM. THE MANUFACTURER WAS NOT NOTIFIED OF THE FAILURE. THE APPROXIMATE FAILURE MILEAGE WAS 500.

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 responses, 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)

any person, animal, object in road beyond 20 yds.
would not be seen by driver in time to respond.
They or it will be struck before driver could respond
causing death or injury

ATTACH ADDITIONAL SHEETS IF NECESSARY

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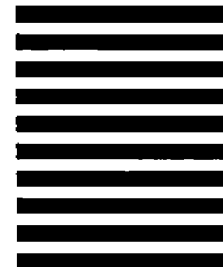
National Highway
Traffic Safety
Administration

1200 New Jersey Avenue SE,
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL

FIRST CLASS MAIL

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WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NEF-100
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



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

