



U.S. Department of Transportation

National Highway Traffic Safety Administration

**DOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)**

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Data Received 16-MAY-2000	Od_or _____
	rt_dt _____
	od_rt _____
	up_ltr _____
Reference No. 722748	

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Listed at front of windshield or drivers side)</small> 1B4GP44R6TB478830	Vehicle Make DODGE TRUCK	Vehicle Model GRAND CARAVA	Vehicle Year 1996	Current Odometer Reading
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Purchase Date 01-JUN-1996	Dealer's Name _____	Engine Size (CID/CYL) 3.3LMP	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Ult <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02460000	Par. Name(s) SUSPENSION: SINGLE AXLE: REAR: SHOCK ABSORBER	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
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No. of Failures 5	Date(s) of Failure(s) 05-JUL-1996	Mileage at Failure(s) 1181	Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

FIRST INCIDENT OF REAR SHOCKS GOING BAD WAS ONLY AT 1000 MILES, LESS THAN ONE MONTH FROM DELIVERY OF VAN TO US. SINCE THAT TIME, WE HAVE HAD FIVE FAILURES OF THE REAR (MOSTLY RIGHT) SHOCKS. CURRENTLY WE ARE SCHEDULED TO HAVE A SIXTH REPLACEMENT OF REAR RIGHT SHOCK ON 06/22/00. NOT ONLY DOES THIS RIGHT SHOCK PROBLEM SEEM HABITUAL, THE DEALER INSISTS THAT THIS IS NOT A "LEMOM" PROBLEM AND NOT A HABITUAL ONE. SIX TIMES TO HAVE A SHOCK REPLACEMENT WITH ONLY 43,700 MILES ON A CAR? WE FIND THIS HARD TO BELIEVE AND DO NOT KNOW WHERE TO GO TO GET THE HELP WE NEED TO EITHER GET THE SHOCKS FIXED ONCE AND FOR ALL OR FOR A COMPLETE INVESTIGATION INTO OUR CAR TO SEE IF THE FRAME OF THE CAR WAS BUILT CROOKED. THAT IS OUR GUT FEEL AS WE HAVE HAD CONSISTENT PROBLEMS WITH

CONTINUED ON BACK PLEASE

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.