



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  
**30-OCT-2000**

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_ltr \_\_\_\_\_

Reference No.  
**735458**

Work Number \_\_\_\_\_  
Home Number \_\_\_\_\_

**OWNER INFORMATION (Type or Print)**

**JACQUELINE EVANS 652766**  
**2238 BEAVERDAM ROAD**  
**COLBERT GA 30628**

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>(located at front of windshield or drivers side)</small> <b>4P3CS34T5NE141748</b>	Vehicle Make <b>PLYMOUTH</b>	Vehicle Model <b>LASER</b>	Vehicle Year <b>1992</b>	Current Odometer Reading
--	---------------------------------	-------------------------------	-----------------------------	--------------------------

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	<input type="checkbox"/> Diesel
			<input type="checkbox"/> Gas
			<input type="checkbox"/> Fuel Injection

Transmission Type <input type="checkbox"/> Manual	Antilock Brakes <input type="checkbox"/> Yes	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input type="checkbox"/> Driver's Side Air Bag <input type="checkbox"/> 2-Point Belt	Cruise Control <input type="checkbox"/> Yes	Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Sport Util. Truck	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door
--	---	---	--	--	--	---

