



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

Auto Safety Hotline

**Vehicle Owner's Questionnaire**

NATIONWIDE 1-800-424-9393  
DC METRO AREA (202) 366-0123  
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 258

Date Received

07-FEB-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
ip\_ltr \_\_\_\_\_

Reference No.

740599

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 bottom of dashboard on driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2C3HD56F8TH133223	CHRYSLER	CONCORDE	1996	

Purchase Date 01-JUL-2096 <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CCL DONT K) No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
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Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	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"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Util Truck <input type="checkbox"/> Motorcycle	Body Style <input type="checkbox"/> 2-Door <input checked="" 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 12364000	Part Name(s) INTERIOR SYSTEMS:BUCKET:BACK REST	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures 1	Date(s) of Failure(s) 06-FEB-2001 Mileage at Failure(s) 91978 Vehicle Speed at Failure(s) 0	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

## 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)

THE BACK OF MY SEAT SEEMED TO MOVE UP AND DOWN SO I TOOK IT OUT AND WHERE THE METAL BRACKET WHICH IS A ONE PIECE METAL FRAME FROM ON THE BACK OF THE SEAT BROKE ON THE RIGHT SIDE OF THE DRIVERS SEAT. HAD BOTH BRACKET BROKE THE BACK OF THE SEAT WOULD HAVE FALLEN INTO THE BACK SEAT OF THE CAR WITH THE DRIVER WHICH COULD HAVE CAUSED AN ACCIDENT. I CALLED CHRYSLER AND THEY SAID THERE WASN'T ANY RECALLS ON IT. I HAVE NEVER HAD ANY SEAT IN ANY CAR I'VE EVER OWNED DO THAT! IT'S A POWER SEAT AND I SHUDDER TO THINK WHAT KIND OF MONEY THEY WILL WANT TO FIX IT. I THINK THIS COULD HAVE BEEN A VERY DANGEROUS SITUATION FOR THE SAFETY OF ME AND ANYONE IN THE CAR WITH ME. I TOOK PICTURES OF THE BROKEN BRACKET. \*AK

CONTINUE ON BACK IF NEEDED

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.