



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

26-JUL-2001

Od. or
rt. dt
pd. rt
rp. ltr

Reference No.

749228

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>(Location at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1B4GP44R4TB158826	DODGE TRUCK	GRAND CARAVA	1996	

Purchase Date 01-OCT-1998	Dealer's Name _____	Engine Size (CID/CC/L) 3.3 LI	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio
<input type="checkbox"/> New <input checked="" 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"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <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 Util <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 08140000	Part Name(s) FUEL:FUEL SYSTEM OTHER PARTS	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
No of Failure 1	Date(s) of Failure(s) 01-JUL-2001 78000 Mileage at Failure(s) _____ 0	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 Damag	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)

WHEN PARKING ON A STEEP INCLINE TWO WEEKS AGO, I NOTICED THE SMELL OF GAS. I LOOKED AT THE GAS TANK AND SAW SIGNIFICANT LEAKAGE. I TOOK THE VEHICLE TO THE CHRYSLER DEALER WHERE I HAVE MY SERVICE DONE. I WAS TOLD BY BOB LELAND THAT THE CAUSE OF THE LEAD WAS THE ROLLOVER VALVE ON TOP OF THE TANK, AND THAT THE ONLY REMEDY WAS A COMPLETE GAS TANK REPLACEMENT AT A COST OF \$309, PLUS TAX. HE SAID THERE IS ANOTHER ROLLOVER VALVE ON THIS VEHICLE THAT WAS SUBJECT TO A RECALL, BUT THAT THIS IS A DIFFERENT ROLLOVER VALVE. I CONTACTED TWO PERSONS AT DAIMLER-CHRYSLER CUSTOMER SERVICE (USING THE NUMBER THAT BOB LELAND GAVE ME). BOTH PERSON, RYAN AND JULE AT 800 992 1997 INDICATED THAT THE PART WAS NOT SUBJECT TO RECALL, WAS NOT UNDER WARRANTY, AND THEREFORE THEY WOULD NOT PAY FOR

COPIES OF THIS FORM ARE:

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.