


DOT Auto Safety Hotline		FOR AGENCY USE ONLY 1220	
 U.S. Department of Transportation National Highway Traffic Safety Administration		<b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print)		Date Received <u>01-NOV-2002</u> Defects Involved <u>CIRCUIT DEFECTS</u> Reference No. <u>8022059</u>	
<u>COOTVILLE</u> <u>WA</u>		Work Number _____ Home Number _____	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide a copy of your report to the vehicle manufacturer.			
Signature of Owner _____		Date <u>12/24/02</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) <u>1C3A166R7MD154631</u>	Vehicle Make <u>CHRYSLER</u>	Vehicle Model <u>NEW YORKER</u>	Vehicle Year <u>1994</u>
Purchase Date _____		Current Odometer Reading <u>147885</u>	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealers Name <u>Oak Harbor Motors</u> City <u>Oak Harbor</u> State <u>Wa</u> Zip Code <u>98277</u>	Engine Size (CID/CC/L) <u>3.3</u> No Cylinders <u>6</u>	<input type="checkbox"/> Turbo Diesel <input checked="" type="checkbox"/> Gas Fuel Injectio
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input checked="" 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 checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other
			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
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>05150000</u>	Part Name(s) <u>ENGINE:OTHER PARTS</u> <u>In Motor</u>	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failures	Date(s) of Failure(s) <u>10/28 thru 11/04/02</u> Mileage at Failure(s) <u>147000</u> Vehicle Speed at Failure(s) <u>any speed</u>	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input checked="" 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 type="checkbox"/> No	Number of Persons Injured	Number of Fatalities
		Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
<b>WHILE DRIVING THE VEHICLE IT COMPLETELY SHUTS DOWN. CONSUMER CAN DRIVE THE VEHICLE SHORT DISTANCE (5) MILES AND THE VEHICLE WILL JUST SHUT DOWN. TOOK TO THE DEALER. PROBLEM HAS NOT BEEN SOLVED AS OF YET. THE DEALER STATES THAT THEY CANNOT FIND THE PROBLEM. PLEASE PROVIDE ANY FURTHER INFORMATION. MR</b>			
CONTINUE ON BACK IF NEEDED			
The Privacy Act of 1974-Public Law 93-570 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 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.			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Motor would stop at any speed or any of <sup>amount</sup> miles  
Down from 1 mile driven, 15 miles, 15 miles  
or 52 miles

This was very scary & dangerous!  
When motor does not break because of  
power steering.

It took so long to locate problem & expensive.  
The problem was the CAM SENSOR and CRANK

If anyone else has this type of difficulty, this test  
cannot be found unless the repair man is right  
there when it shows up on instrument <sup>SENSORS</sup>

It can save their testing in a sense for days  
or hours or weeks.  
Someone how to be able to  
catch this when engine stops.  
Very important!

US Department  
of Transportation  
National Highway  
Traffic Safety  
Administration

400 Seventh St., S.W.  
Washington, D.C. 20590

Official Business  
Penalty for Private Use \$300

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
DOT Auto Safety Hotline, NSA-10.1  
400 7th Street, SW  
Washington, DC 20590

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**VEHICLE  
OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

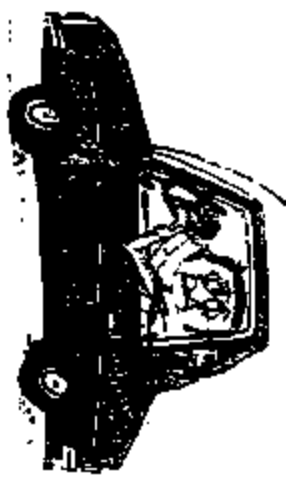
**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**

1-888-327-4236

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(DASH) 2 DOT



US Department of Transportation  
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http://www.nhtsa.dot.gov/vehicles