

U.S. Department  
of TransportationNational 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 294

Date Received

08-MAR-2000

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

Reference No.

858175

 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 driver's side)</small>	Vehicle Make <b>DODGE TRUCK</b>	Vehicle Model <b>GRAND CARAVA</b>	Vehicle Year <b>1996</b>	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<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 type="checkbox"/> Yes <input checked="" 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 Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input 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 <b>06136000</b>	Part Name(s) <b>FUEL:FUEL PUMP</b>	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	Date(s) of Failure(s) <u>24-FCB-2000</u>	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) _____		
	Vehicle Speed at Failure(s) _____		

## 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 checked="" 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)

CONSUMER RECEIVED RECALL LETTER 99V216/FUEL PUMP FAILURE. CONTACTED DEALER. WAS NOTIFIED THAT PARTS WERE NOT AVAILABLE. \*AK

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.

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**Vehicle Owner's Questionnaire (VOQ)**  
 Date Received: 08-MAR-2000  
 Reference No.: 858175

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  
 YES  
 NO  
 Signature of Owner: [Redacted]  
 Date: 3/17/00

Vehicle Identification No. (VIN): [Redacted]  
 Vehicle Make: DODGE  
 Vehicle Model: GRAND CARAVA  
 Vehicle Year: 1996  
 Current Odometer Reading: [Redacted]

Purchase Date: 8/19/96  
 Dealer's Name: VICTORY AUTO  
 City: MEMPHIS, TN  
 State: TN  
 Zip Code: [Redacted]

Antilock Brakes:  Yes  
 Restraint System:  3-Point Belt  
 Cruise Control:  No  
 Drive Train:  Front  
 Vehicle Type:  Car

Component: 08136000  
 Part Name(s): FUEL-FUEL PUMP  
 Location:  Left  
 Failed Part(s):  Original

No of Failures: [Redacted]  
 Date(s) of Failure(s): 24-FEB-2000  
 Mileage at Failure(s): [Redacted]  
 Vehicle Speed at Failure(s): [Redacted]

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

**FAILED COMPONENT(S)/PART(S) INFORMATION**

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

**NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)**

CONSUMER RECEIVED RECALL LETTER 99V216/FUEL PUMP FAILURE, CONTACTED DEALER, WAS NOTIFIED THAT PARTS WERE NOT AVAILABLE. AK  
 I FEEL THAT THIS IS A VERY SERIOUS RECALL  
 AND FOR THE RISKER NOT KNOW WHEN THE  
 PARTS WILL BE AVAILABLE IS UNACCEPTABLE.  
 IN THE MEANTIME I ALON & WIRTH MAKE  
 CONTINUE ON BACK IF NEEDED

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# DAIMLERCHRYSLER

## **SAFETY RECALL TO REPLACE YOUR MINIVAN'S FUEL PUMP MODULE SEAL**

Dear DaimlerChrysler Minivan Owner:

This notice is sent to you in accordance with the requirements of the National Traffic and Motor Vehicle Safety Act.

DaimlerChrysler Corporation has determined that a defect, which relates to motor vehicle safety, exists in some 1996 model year Chrysler Town & Country, Dodge Caravan/Grand Caravan and Plymouth Voyager/Grand Voyager minivans.

***The problem is...***

The fuel pump module seal and lock out on your minivan (identified on the enclosed form) may allow fuel leakage to occur. Fuel leakage in the presence of an ignition source could result in an underbody fire.

***What DaimlerChrysler and your dealer will do...***

DaimlerChrysler will repair your vehicle free of charge (parts and labor). To do this, your dealer will replace the fuel pump seal, and if necessary, the fuel pump module lock nut. The work will take about one hour to complete. However, additional time may be necessary depending on how dealer appointments are scheduled and processed.

***What you must do to ensure your safety...***

- Simply contact your dealer right away to schedule a service appointment. Ask the dealer to hold the parts for your vehicle or to order them before your appointment.
- Bring the enclosed Owner Notification Form with you to your dealer. It identifies the required service to the dealer.

***If you need help...***

If, after contacting your local dealership, you have questions or concerns which the dealership is unable to resolve, please contact the DaimlerChrysler Customer Assistance Center at 1-800-992-1997. A representative will assist you. If your dealer fails or is unable to remedy this defect without charge and within a reasonable time, you may submit a written complaint to the Administrator, National Highway Traffic Safety Administration, 400 Seventh Street, S.W., Washington, DC 20590, or call the Toll Free Auto Safety Hotline at 1-800-424-9393. Washington, DC area residents may call 1-202-366-0123.

We're sorry for any inconvenience, but we are sincerely concerned about your safety. Thank you for your attention to this important matter.

Customer Services Field Operations  
DaimlerChrysler Corporation

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*Buckle up  
for Safety*