

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 255

Date Received

31-OCT-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

874226

 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) _____ (located at front of windshield on drivers side)	Vehicle Make CHRYSLER TRUC	Vehicle Model TOWN AND COUN	Vehicle Year 1996	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CCL) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 06300000	Part Name(s) FUEL:FUEL INJECTION SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ Yes ☐ 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 ☐ Yes ☒ No	Fire ☒ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS BURNED UP. FIRE STARTED IN ENGINE COMPARTMENT BURNING THE FUEL RAIL. THERE IS RECALL 00V268000 FOR A FUEL RAIL LEAK ON THIS VEHICLE. DEALER HAS NOT BEEN CONTACTED.*AK

CONTINUED ON BACK (RELEAS)

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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 255 Date Received <u>31-OCT-2000</u> Office <u>OFFICE OF INVESTIGATION</u> Reference No. <u>874226</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print)  652139			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an address, please provide the address to the vehicle manufacturer. Signature of Owner _____ Date <u>11/11/00</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>1C4GP64L1VB485164</u>		Vehicle Make <u>CHRYSLER TRUC</u>	Vehicle Model <u>TOWN AND COU</u>
		Vehicle Year <u>1997</u> 1996	Current Odometer Reading <u>55,000</u>
Purchase Date <u>AUG 1997</u> ☒ New ☒ Used	Dealer's Name <u>LANDERS CHRYSLER</u> City <u>Benton</u> State <u>AR</u> Zip Code <u>72015</u>		Engine Size (CID/GC/L) <u>3.8</u> No Cylinders <u>6</u> ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
		Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Sport Utl ☐ 2-Door ☒ Van ☐ Truck ☐ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☐ Pick Up Truck ☒ Other <u>Van</u>
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>06300000</u>	Part Name(s) <u>FUEL:FUEL INJECTION SYSTEM</u>		Location ☐ Left ☐ Right ☒ Front ☐ Rear Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>10-9-00</u> Mileage at Failure(s) <u>55,000</u> Vehicle Speed at Failure(s) <u>10 MPH</u>		Failed Part(s) Available? ☐ Yes ☒ No NHTSA Previously Contacted? ☐ Yes ☒ 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 ☐ Yes ☒ No	Fire ☒ Yes ☐ No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>
		Estimated Property Damage <u>\$20,000</u>	Reported to Police ☐ Yes ☒ No
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
VEHICLE WAS BURNED UP. FIRE STARTED IN ENGINE COMPARTMENT BURNING THE FUEL RAIL. THERE IS RECALL 00V268000 FOR A FUEL RAIL LEAK ON THIS VEHICLE. DEALER HAS NOT BEEN CONTACTED.*AK Vehicle was burned but not destroyed, Since filing this report I have contacted Chrysler. They are investigating. Vehicle is currently at LANDERS dealership in Benton, AR			
CONTINUE ON BACK IF NEEDED			
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