



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 117

Date Received

07-DEC-2000

Od_or _____
R_dt _____
od_rt _____
up_ltr _____

Reference No.

876169

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) (lasted attempt at windshield or drivers side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1C3EJ56H2WN118287	CHRYSLER	LHS	1998	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ 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 06400000 03250000 12111000	Part Name(s) FUEL:THROTTLE LINKAGES AND CONTROL BRAKES:HYDRAULIC:ANTI-SKID SYSTEM INTERIOR SYSTEMS:PASSENGER RESTRAINTS:AIR BAG:FRONTA	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 1	Date(s) of Failure(s) _____ Mileage at Failure(s) 40 Vehicle Speed at Failure(s) 40	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 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WAS DRIVING 40MPH & CAME UPON A STOP LIGHT. WAS WAITING AT STOP LIGHT WHEN VEHICLE SUDDENLY ACCELERATED. GAS PEDAL WENT TO FLOOR. WAS HEADING TOWARDS THE WATER. MANAGED TO TURN STEERING WHEEL. HIT THE BALANET HEAD-ON. NEITHER AIR BAG DEPLOYED, AND BRAKES FAILED. *AK

CONTINUED ON BACK (SEE INSTRUCTIONS)

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.



U.S. Department of Transportation
National Highway Traffic Safety Administration
Vehicle Owner's Questionnaire (VOQ)
NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

669709

OWNER INFORMATION (Type or Print)

Work Number

Home Number

876165

Date Received

07-DEC-2000

FOR AGENCY USE ONLY 117

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
YES ☐ NO ☐

Signature of Owner _____
Date _____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 1C3EJ56H2WN118287
Vehicle Make CHRYSLER
Vehicle Model CIRRUS
Vehicle Year 1998
Current Odometer Reading 46240

Purchase Date 2/14/98
Dealer's Name GREEN/ARMA CHRYSLER
City/State/Zip Code CHICAGO/IL/60606
New ☐ Used ☒

Transmission Type Automatic ☒ Manual ☐
Antilock Brakes Yes ☒ No ☐
Restraint System 3-Point Belt ☒ 3-Point Belt Motorbelt ☐ Driver's Side Airbag ☐ Passenger's Side Airbag ☐
Cruise Control Yes ☒ No ☐
Drive Train Front ☒ Rear ☐ 4-Wheel ☐
Vehicle Type Car ☒ Van ☐ Minivan ☐ Other ☐
Body Style Sport Utility ☐ Truck ☐ Motorcycle ☐ Station Wagon ☐ Pick Up Truck ☐ Other ☐

Component 08400000
03260000
12111000
Fuel, Throttle Linkages and Control
Brakes: Hydraulic, Anti-Skid System
Interior Systems: Passenger Restraints: Air Bag: Front
Location Left ☐ Right ☐ Front ☐ Rear ☐
Failed Part(s) Original ☐ Replacement ☐
No of Failures 1
Date(s) of Failure(s) 19-OCT-2000
Mileage at Failure(s) 40
Vehicle Speed at Failure(s) 40
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 0
Number of Fatalities 0
Estimated Property Damage NONE
Reported to Police Yes ☐ No ☒

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

WAS DRIVING 40MPH & CAME UPON A STOP LIGHT. WAS WAITING AT STOP LIGHT WHEN VEHICLE SUDDENLY ACCELERATED. GAS PEDAL WENT TO FLOOR. WAS HEADING TOWARDS THE WATER. MANAGED TO TURN STEERING WHEEL. HIT THE BALANET HEAD-ON. NEITHER AIR BAG DEPLOYED, AND BRAKES FAILED. YAK

CONTINUE ON BACK IF NEEDED

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