

 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 156	
OWNER INFORMATION (Type or Print) 564272		Date Received 04-JAN-2001	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
		Reference No. 877407	
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.		Work Number _____ Home Number _____	
Signature of Owner _____ Date ____/____/____			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield or driver's side) 2C4GJ2537YR848999	Vehicle Mak PLYMOUTH TRUC	Vehicle Mode VOYAGER	Vehicle Year 2000
Current Odometer Reading _____			
Purchase Date _____ ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Siz (CID/CC/L) _____ No Cylinders _____ ☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Yes ☐ Automatic ☒ No	Anti lock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Contro ☐ Yes ☒ No
Drive Trai ☐ Front ☐ Rear ☐ 4 Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 12310000	Part Name(s) INTERIOR SYSTEMS: SEAT TRACKS AND ANCHORS		Location ☐ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☐ Original ☐ Replacement		No of Failures _____ Date(s) of Failure(s) 31-DEC-2000 Mileage at Failure(s) 7 Vehicle Speed at Failure(s) _____	
Failed Part(s) ☐ Yes ☐ No		NHTSA Previously ☐ 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 Fatalitie _____
Estimated Property Damag _____		Reported to Polic ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING 20 MPH ANOTHER VEHICLE REARENDED CONSUMER'S VEHICLE PUSHING VEHICLE FORWARD, DRIVER'S SEAT BROKE, AND DRIVER FELL BACKWARDS. IF CHILD WAS IN CAR SEAT DRIVER'S SEAT WOULD HAVE FALLEN ON TOP OF CHILD'S LEGS. CHRSYLER HAS BEEN NOTIFIED. PLEASE PROVIDE FURTHER INFORMATION. *AK			
CONTINUE ON BACK IF NEEDED			
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.			