



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

130

Date Received

23-JAN-2001

Od_or _____
rt_dt _____
pd_rt _____
ip_ltr _____

Reference No.

876845

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 bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2P4SP25B9XR200089	PLYMOUTH TRUC	VOYAGER	1999	

Purchase Date ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size _____ (CID/CC/L) No Cylinders _____	☐ 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 Util ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____	

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 08500000	Part Name(s) ELECTRICAL SYSTEM:IGNITION	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) 25000 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)

AT ANY TIME VEHICLE WILL HESITATE, AND ON ONE OCCASION CAUSED VEHICLE TO STALL, BUT QUICKLY RESTARTED. DEALER IS NOT ABLE TO DETERMINE CAUSE, AND CANNOT COME UP WITH CODES. *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.

 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 160 Date Received <u>21 FEB - 5 PM</u> <u>23-JAN-2001</u> OFFICE DEFECTS INVESTIGATION Reference No. <u>B78845</u> Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) 669285			
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 a copy of the report to the vehicle manufacturer. Signature of Owner Date <u>1/31/01</u>			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2P4SP25B9XR200088		Vehicle Make PLYMOUTH TRUC Vehicle Model VOYAGER Vehicle Year 1999 Current Odometer Reading 29500	
Purchase Date _____ ☒ New ☐ Used		Dealer's Name <u>Jade Chrysler Plymouth</u> Engine Size (CID/CC/L) <u>2.4</u> ☐ Turbo ☒ Diesel ☒ Gas ☒ Fuel Injection City <u>Frederick</u> State <u>MD</u> Zip Code <u>21714</u> No Cylinders <u>4</u>	
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 Utl ☒ Van ☐ Truck ☐ Motorcycle ☐ Minivan ☐ Other	
Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☒ Pick Up Truck <u>3 door</u> ☐ Other			
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 085000000	Part Name(s) ELECTRICAL SYSTEM: IGNITION <u>hesitates - shut off once</u>		Location ☐ Left ☐ Right ☐ Front ☐ Rear
Failed Part(s) ☐ Original ☐ Replacement		No of Failures _____ Date(s) of Failure(s) <u>unlimited</u> Mileage at Failure(s) <u>25000</u> Vehicle Speed at Failure(s) <u>various</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 _____	Number of Fatalities _____
Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
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