



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 336

Date Received

05-MAR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

882045

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) (Locate at bottom of windshield or driver's side)		Vehicle Make PLYMOUTH	Vehicle Model CARAVELLE	Vehicle Year 1988	Current Odometer Reading
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 Bel ☐ 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 01120000	Part Name(s) STEERING COLUMN	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 03-MAR-2001 35000 Mileage 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 Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

STEERING COLUMN BROKE LOOSE AND STEERING DROPPED DOWN IN LAP. TURNED OFF CAR, AND CAUSED CONSUMER NOT TO HAVE BRAKES. *AK

COPIES OF THIS FORM ARE:

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) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 335	
		Date Received <u>05-MAR-2001</u> Effects Investigated <u>DEFECT</u>	Od or st dt od rt up_ltr
OWNER INFORMATION (Type or Print) 677999		Reference No. 882045	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? (In the absence of an authorization, NHTSA will not send information and address to the vehicle manufacturer.) Signature of Owner		☒ YES ☐ NO Date <u>3/24/01</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>1P3B546K93C108307</u>	Vehicle Make <u>PLYMOUTH</u>	Vehicle Model <u>CARAVELLE</u>	Vehicle Year <u>1988</u>
Current Odometer Reading <u>40,000</u>		Engine Size (CID/COIL) ☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection No Cylinders <u>4</u>	
Purchase Date <u>10/99</u> ☐ New ☒ Used	Dealer's Name <u>Individual</u> City _____ State _____ Zip Code _____		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 Ult ☐ 2-Door ☐ Van ☐ Truck ☒ 4-Door ☐ Minivan ☐ Motorcycle ☐ Stationwagon ☐ Other ☐ Pick Up Truck ☐ Other _____		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>01120000</u>	Part Name(s) <u>STEERING COLUMN</u>	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>03-MAR-2001</u> Mileage at Failure(s) <u>35000</u> Vehicle Speed at Failure(s) <u>> 5 mph</u>		Failed Part(s) Available? ☐ Yes ☒ No
NHTSA Previously Contacted? ☐ 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>0</u>		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
STEERING COLUMN BROKE LOOSE AND STEERING DROPPED DOWN IN LAP. TURNED OFF CAR, AND CAUSED CONSUMER NOT TO HAVE BRAKES. *AK Car was no longer controllable. If it had occurred at higher speeds or in heavy traffic a serious accident would have occurred. Models of similar make and year have been recalled. This one should also!			
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.			