



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 §20

Date Received

11-APR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

885664

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 door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1C4GP64LXZB470579	CHRYSLER TRUC	TOWN AND COUN	1997	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio
☒ New ☐ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 01340000	Part Name(s) STEERING:POWER ASSIST:BELT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
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No of Failure	Date(s) of Failure(s) C1-SEP-1999 63000	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No
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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)

BELT AND THE TENSION ROD IN POWER STEERING ASSEMBLY BROKE WITH 30,000 MILES ON VEHICLE. BOTH COMPONENTS WERE REPLACED BY DEALERSHIP. ON 04/10/2001, CONSUMER WAS DRIVING AT APPROXIMATELY 10 MPH HERE WAS A POPPING NOISE, AND POWER STEERING WAS LOST. DEALERSHIP INFORMED CONSUMER THAT BELT AND TENSIONER ROD WENT OUT AGAIN AT 63,000 MILES. DEALERSHIP STATED THAT THIS NEEDED TO BE REPLACED EVERY 30,000 MILES. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS. *AK

CONTINUE ON REVERSE

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 620		
		Date Received: 11-APR-2001 Od_or _____ rt_dt _____ oil_ft _____ up_ltr _____ Reference No. 885664 Work Number _____ Home Number _____		
OWNER INFORMATION (Type or Print) [Redacted] 685884				
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 provide your name and address to the vehicle manufacturer.) Signature of Owner: [Redacted] ☒ YES ☐ NO Date: <u>4/25/2001</u>				
VEHICLE INFORMATION				
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) [Redacted]		Vehicle Make CHRYSLER TRUC	Vehicle Model TOWN AND COU	Vehicle Year 1997 Current Odometer Reading 64,350
Purchase Date <u>June 97</u> ☒ New ☐ Used	Dealer's Name <u>Fiderton Chrysler</u> City <u>High Point</u> State <u>NC</u> Zip Code <u>27260</u>		Engine Size (CID/CC) _____ No. Cylinders <u>6</u> ☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☒ 3-Point Belt ☐ Motor/belt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	Cruise Control ☒ Yes ☐ No	Drive Train ☒ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Jlt ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		
FAILED COMPONENT(S)/PART(S) INFORMATION				
Component 01340000	Part Name(s) STEERING:POWER ASSIST:BELT		Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☒ Original ☒ Replacement
No of Failures <u>2</u>	Date(s) of Failure(s) <u>01-SEP-1999</u> <u>4/2001</u> Mileage at Failure(s) <u>approx 30,000</u> <u>63,000</u> Vehicle Speed at Failure(s) <u>45</u> <u>10</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
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