



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 284

Date Received

04-JUN-2001

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

889654

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	Vehicle Model	Vehicle Year	Current Odometer Reading
2C4FJ2585YR712536	PLYMOUTH TRUC	VOYAGER	2000	

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

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

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
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No of Failure	Date(s) of Failure(s) 26-MAY-2001 21	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)

INTERMITTENTLY AT HIGHWAY SPEEDS VEHICLE WILL SLOW DOWN AND LOSE POWER. DEALER HAS ATTEMPTED TO REPAIR VEHICLE SEVERAL TIMES.*AK

COPIES OF REPORTS - FREE - 1

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 TransportationNational Highway
Traffic Safety
Administration

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

284

Date Received

JUL -2 AM 8:30
04-JUN-2001

OFFICE

DEFECTS INVESTIGATION

Od or

ri_d1

od_r1

up_itr

Reference No.

889654

Work Number

Home Number

OWNER INFORMATION (Type or Print)

695441

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?

☒ YES☐ NO

In the absence of a signature, provide your name and address to the vehicle manufacturer.

Signature of Owner

Date 6/24/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of
windshield on driver's side)

2C4FJ25B5YR712636

Vehicle Make

PLYMOUTH TRUC

Vehicle Model

VOYAGER

Vehicle Year

2000

Current Odometer Reading

22380

Purchase Date

Dealer's Name Chrysler Jeep

Engine Size

(CID/CC/L)

☐ Turbo☐ Diesel☐ Gas☐ Fuel Injection☐ New ☒ UsedCity Ereano State CA Zip Code

No Cylinders

4

Transmission Type

☐ Manual☐ Automatic

Antilock Brakes

☐ Yes☒ No

Restraint System

☐ 3-Point Belt☐ Motorbet☐ Driverside Airbag☐ 2-Point Belt☐ Passengerside Airbag

Cruise Control

☐ Yes☒ No

Drive Train

☐ Front☐ Rear☐ 4-Wheel

Vehicle Type

☐ Car☐ Van☒ Minivan☐ Other☐ Sport Utl☐ Truck☐ Motorcycle

Body Style

☐ 2-Door☒ 4-Door☐ Stationwagon☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
DE100000Part Name(s)
ENGINE

Location

☐ Left☐ Front☐ Right☐ Rear

Failed Part(s)

☐ Original☐ Replacement

No of Failures

4

Date(s) of Failure(s) 26-MAY-2001Mileage at Failure(s) 21Vehicle Speed at Failure(s) 60 To 65 6-22-01Failed Part(s)
Available?☐ Yes ☐ NoNHTSA 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☐ 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)

INTERMITTENTLY AT HIGHWAY SPEEDS VEHICLE WILL SLOW DOWN AND LOSE POWER.
DEALER HAS ATTEMPTED TO REPAIR VEHICLE SEVERAL TIMES.*AK6-23-01
4-19-01
5-25-01
6-15-01SORRY I DON'T WANT THIS
VAN

CONTINUE ON BACK IF NEEDED

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