



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 936

Date Received

02-OCT-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

897216

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) <small>(Locate at bottom of and/or above driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1B4GP54L2TB253192	DODGE TRUCK	CARAVAN	1996			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio			
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input checked="" type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 09010000	Part Name(s) LIGHTING:GENERAL OR UNKNOWN COMPONENT:TURN SIGNAL	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Date(s) of Failure(s) _____ Mileage at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

LEFT AND RIGHT TURNING SIGNALS DO NOT WORK. CONSUMER FEELS THIS IS VERY DANGEROUS WHEN TRYING TO TURN OFF A BUSY STREET WITH OTHER CARS BEHIND YOU. PLEASE PROVIDE ANY FURTHER INFORMATION.*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.

 <p>DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline</p>		<p>FOR AGENCY USE ONLY 335</p>	
<p>U.S. Department of Transportation National Highway Traffic Safety Administration</p>		<p>Date Received: OCT 23 AM 11:00 OCT 2001 DEFECTS IN: STIGATON</p>	
<p>OWNER INFORMATION (Type or Print)</p> <p>[Redacted] 718395</p>		<p>Reference No. 897216</p>	
<p>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.</p> <p>Signature of Owner: [Redacted]</p>		<p>Work Number: [Redacted] Home Number: [Redacted]</p> <p>YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Date: 10/11/01</p>	
<p>VEHICLE INFORMATION</p>			
<p>Vehicle Ident. No. (VIN) 1B4GP54L2TB253192</p>		<p>Vehicle Make DODGE TRUCK Vehicle Model GRAND CARAVAN</p>	
<p>Purchase Date 10/95 <input checked="" type="checkbox"/> New <input type="checkbox"/> Used</p>		<p>Vehicle Year 1996 Current Odometer Reading 90,000</p>	
<p>Dealer's Name Koons Dodge City FALLS CHURCH State VA Zip Code _____</p>		<p>Engine Size (CID/CC/L) 3.8 No. Cylinders 6</p> <p><input type="checkbox"/> Turbo Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injected</p>	
<p>Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic</p>		<p>Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag</p>		<p>Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
<p>Drive Train <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel</p>		<p>Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Sport/Ult. <input type="checkbox"/> 2-Door <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Pick Up <input type="checkbox"/> Truck <input checked="" type="checkbox"/> Minivan</p>	
<p>FAILED COMPONENT(S)/PART(S) INFORMATION</p>			
<p>Component 09010000</p>		<p>Part Name(s) LIGHTING:GENERAL OR UNKNOWN COMPONENT:TURN SIGNAL</p>	
<p>No. of Failures 4</p>		<p>Date(s) of Failure(s) 29-JUL-1998, 9/97, 7/13/99 + 10/01 Mileage at Failure(s) 27,000, 189,000 Vehicle Speed at Failure(s) N/A</p>	
<p>Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Right</p>		<p>Failed Part(s) <input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement</p>	
<p>Failed Part(s) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>		<p>NHTSA Previously <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>APPLICATION INCIDENT INFORMATION</p> <p>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)</p>			
<p>Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>Number of Persons Injured _____</p>		<p>Number of Fatalities _____</p>	
<p>Estimated Property Damage _____</p>		<p>Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)</p>			
<p>LEFT AND RIGHT TURNING SIGNALS DO NOT WORK. CONSUMER FEELS THIS IS VERY DANGEROUS WHEN TRYING TO TURN OFF A BUSY STREET WITH OTHER CARS BEHIND YOU. PLEASE PROVIDE ANY FURTHER INFORMATION.*AK</p> <p>MULTI FUNCTION SWITCH WAS REPLACED 3 TIMES, WHEN TURN TURN SIGNAL FAILED A 4TH TIME, DE TEMPLETON DODGE (VICIN, VA) REFUSED TO REPLACE, SAYING CAR OUT OF WARRANTY. TEMPLETON REPLACED FLASHER AT A COST OF APPROXIMATELY \$90 - TURN SIGNAL WORKS NOW.</p>			
<p>CONTINUE ON BACK IF NEEDED</p>			
<p>The Privacy Act of 1974 (Public Law 93-502) 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.</p>			