



U.S. Department of Transportation  
National Highway Traffic Safety Administration

**DOT Auto Safety Hotline**  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 335

Date Received

Repository

JAN 23 2003

Reference No.  
10004477

**OWNER INFORMATION (Type or Print)**

OFFICE DEFECTS INVESTIGATION

Name: [REDACTED]  
Address: [REDACTED]  
City: KETTERING State: OH Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]  
Evening Telephone Number: [REDACTED]

E-mail Address

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.  
Signature of Owner: [REDACTED] Date: 2-15-03

**VEHICLE INFORMATION**

Vehicle Identification Number: NOT AVAILABLE  
Make: JAGUAR Model: XJ6 Model Year: 1993  
Date Purchased: [REDACTED] Dealer's Name and Telephone Number: [REDACTED] Engine: No: Cylinders: 6 Fuel Type: PREM  
Original Owner: [REDACTED] Dealer's City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]  
Transmission Type: Auto.  Antilock Brakes  Cruise Control Powertrain: [REDACTED]  
Vehicle Component Code: 151400 SEAT BELTS:FRONT:BUCKLE ASSEMBLY  
Multiple Failure: Rear Buckle failure

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s): 16-JAN-2003 Failure Mileage: 112200 Failure Speed: [REDACTED]  
Replacement costs sheets attached, Material only. Labor to install done by owner.

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make: [REDACTED] Tire Model (Name or Number): [REDACTED] Tire Size (Example P215/65R15): [REDACTED]  
DOT No. (Example: DOTM1SABC036): [REDACTED]  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code: [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash:  Yes  No Fire:  Yes  No  
Number of Persons Injured: [REDACTED] Number of Deaths: [REDACTED] Reported to Police: N

Narrative Description of Incident(s), Crash(es), and Injury(ies).  
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

DRIVERS SEAT AND THE REAR DRIVERS SEAT BUCKLES ARE BROKE. CONSUMER STATES THAT THE SEAT BELTS DONT FASTEN. PLEASE PROVIDE ANY FURTHER INFORMATION. TS

The catch on both buckles is broken. They would not hold and had to be replaced. I fear the failure of the front passenger seat is eminent as the buckle does not snap when fastened but seems to hold. this may be indication prior to failure.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

**THE ATTACHMENTS TO THIS  
DOCUMENT HAVE BEEN REMOVED  
TO PROTECT UNWARRANTED  
INVASION OF PERSONAL PRIVACY  
PURSUANT TO EXEMPTION 6 OF  
THE FREEDOM OF INFORMATION  
ACT (FOIA), 5 U.S.C. 552(b)(6).**