



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 2003 OCT - 1
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received
PH NO: 511 23-JUL-2003
Repository
Reference No.
10030012

OWNER INFORMATION (Type or Print)

Name [Redacted]
Address [Redacted]
City WICHITA State KS Zip Code [Redacted]
Daytime Telephone Number [Redacted] E-mail Address [Redacted]
Evening Telephone Number [Redacted]

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 _____ Date 1/1

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1J4GWB8N7XC500210
Make JEEP Model GRAND CHEROKEE Model Year 1999
Date Purchased _____ Dealer's Name and Telephone Number Davis Moore
Original Owner Dealer's City Wichita State KS Zip Code 67207 Engine: No. Cylinders 3 Fuel Type: unleaded
Transmission Type 4spd AUTOMATIC Antilock Brakes Cruise Control Powertrain 4x4
Vehicle Component Code 061100 ENGINE AND ENGINE COOLING;ENGINE:GASOLINE
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 23-JUL-2003 Failure Mileage 85123 Failure Speed Gas Tank

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make _____ Tire Model (Name or Number) _____ Tire Size (Example P215/65R15)
DOT No. (Example: DOTM15ABC036) Original Equipment Prior Repair Failure Location: _____
Tire Component Code _____ Tire Failure Type _____

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

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

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 _____ Number of Deaths _____ 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).

CONSUMER IS CONCERNED IF THE VEHICLE IS FILLED UP WITH GASOLINE. THE CHECK ENGINE LIGHT WILL COME ON WITHOUT PRIOR WARNING. *AK
I noticed that the "check engine" light kept coming on. Upon diagnosing the problem it was determined there was an evaporation leak. The leak was in the rollover valve which is part of the gas tank. When I called Chrysler they told me there were 500 gas tanks on back order. This seemed odd. Did they expect a problem. My vehicle is only 4 yrs old and has a bad gas tank? I've never had that problem with ANY vehicle until now. Please investigate.

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).**