



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 1368

Date Received

30-APR-2004

Repository

Reference No.
10071908 09

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: FORT MYERS State: FL Zip Code: [REDACTED]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
In the absence of a signature, provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 5/12/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number (located at bottom of windshield on driver's side): SAJG2740VC011666
Make: JAGUAR Model: XJ Model Year: 1997
Date Purchased: 6/1/03 Dealer's Name and Telephone Number: [REDACTED]
Engine: No. Cylinders: 8 Fuel Type: GAS
Original Owner: Dealer's City: [REDACTED] State: FL Zip Code: [REDACTED]
Transmission Type: Antilock Brakes Powertrain: [REDACTED] Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION
 Cruise Control Multiple Failures: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 09-APR-2004 Failure Mileage: 53000 Failure Speed: [REDACTED]

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: DOTM13ABC036): [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 Types: [REDACTED] Installation Systems: [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 (e.g., parts repaired or replaced (and if old part is available)).

WHILE DRIVING 20 MPH, THE TRANSMISSION FAILED WHICH CAUSED THE VEHICLE TO LOOSE POWER. THE DEALERSHIP WAS NOTIFIED, BUT DID NOT RESOLVE THE PROBLEM. FLA [REDACTED] I WENT TO Buy a Robert Transmission.

Copy of invoice attached.
Failure happened as I was merging with traffic, coming 55 mph. I was able to pull to the side road, to avoid being rear-ended as I was out in the flow of traffic.

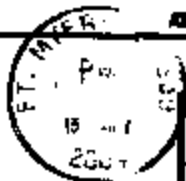
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY.

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

As I was going out on the truck lane, when 5891A, it about 10:20 AM
The program began to rain but the road would not
have frozen. After seeing the shift to another position,
I was able to get the car to the side of the road - I was able
to move the car to the shoulder fairly in high gear. I got out if
I had not needed equally, I could in all probably been remembered

ATTACH ADDITIONAL SHEETS IF NECESSARY



CREATING FROM

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.safercar.gov/hotline>

DOT Auto Safety Hotline
(DASH) & DOT

1-888-DASH-2-DOT
1-888-327-4238

and dial toll free at

DASH2DOT

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
ON

DOT AUTO SAFETY HOTLINE

**VEHICLE
OWNER'S
QUESTIONNAIRE**



**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).**