



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 100248

Date Received

25-MAR-2005

Repository

Reference No:
10115833

OWNER INFORMATION (Type or Print)

Name

Address:

City MUSCATINE

State IA

Zip Code

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 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 instrument or driver's side

1J4GW48521C

Make

JEEP

Model

GRAND CHEROKEE

Model Year

2001

Date Purchased

Feb 02

Dealer's Name and Telephone Number

Krieger's

Engine:

No. Cylinders 6

Fuel Type:

Gas

Original Owner

Dealer's City

MUSCATINE

State

IA

Zip Code

52161

Transmission Type

AUTOMATIC

Antilock Brakes

Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

221200 SEATS:FRONT ASSEMBLY:RECLINER

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

22-MAR-2005

Failure Mileage

Failure Speed

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: DOTM19ABC036)

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

0

Number of Deaths

0

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).

VEHICLE WAS TAKEN TO THE DEALER FOR REGULAR MAINTENANCE. OWNER WAS CONCERNED THAT DRIVER'S SEAT WAS MAKING NOISE, AND RESULTS SHOWED THAT FRAME ON THE SEAT BROKE AND NEEDED TO BE REPLACED, WHICH COULD NOT PROVIDE PROPER SAFETY IF THE VEHICLE WERE TO BE INVOLVED IN AN ACCIDENT. *AK

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.