



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 100148

Date Received

Repository ☐

2006 APR 11 PM 7:11
22-MAR-2006

Reference No.
10153457

OWNER INFORMATION (Type or Print)

Name
Address
City BEND State OR 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 ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
1B7HC13YXWJ

Date Purchased 02-JAN-00	Dealer's Name and Telephone Number HERTZ	Engine: No: Cylinders 8	Model Year 1998
Original Owner ☐	Dealer's City BEND	State OR	Zip Code
Transmission Type AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain REAR WHEEL DRIVE	Vehicle Component Code 185000 VEHICLE SPEED CONTROL; CRUISE CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
11-JAN-2006

Failure Mileage
69013

Failure Speed
70

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	Number of Deaths	Reported to Police: N
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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).

DT*: THE CONTACT STATED WHILE DRIVING THE VEHICLE WITH THE CRUISE CONTROL SET ON 70MPH IT BECAME STUCK. THE VEHICLE'S SPEED KEPT ACCELERATING, THE ENGINE REVVED. THE BRAKE PEDAL HAD TO BE DEPRESSED VERY HARD TO GET THE VEHICLE TO SLOW DOWN. AFTER SLOWING DOWN THE VEHICLE IT WAS PUT INTO NEUTRAL. THE VEHICLE WAS THEN SHUT OFF; AND TAKEN TO A DEALERSHIP. UPON INSPECTION THE PROBLEM WAS THE CRUISE CONTROL VALVE THAT WAS LOCATED UNDER THE BATTERY. ACID FROM THE BATTERY LEAKED DOWN ONTO THE CRUISE CONTROL VALVE CAUSING IT TO STICK. THE DEALER DISCONNECTED THE CRUISE CONTROL.

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.

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

WHEN PUT IN NEUTRAL ENGINE CUT INTO REPRIME
ON TACH. TOLD THOMAS SALES ABOUT IT IN BRAND, THEY
GAVE ME PHONE # FOR CHRISTLER - CALLED AND REPORTED
TO CHARTIER SAID THERE SHOULD BE A RECALL - THEY SAID
NO RECALL - BUT THAT VALUE HAS BEEN MOVED IN
LATER MODELS

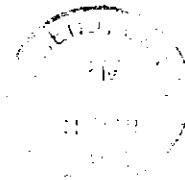
ATTACH ADDITIONAL SHEETS IF NECESSARY

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



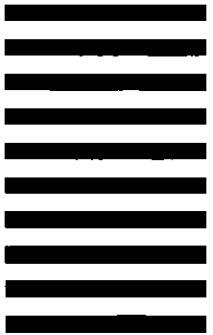
NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

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-210
400 7th Street, SW
Washington, DC 20590



**Think your vehicle
has a safety defect?**



**If so:
Use the enclosed
form to file a report.**

or visit:

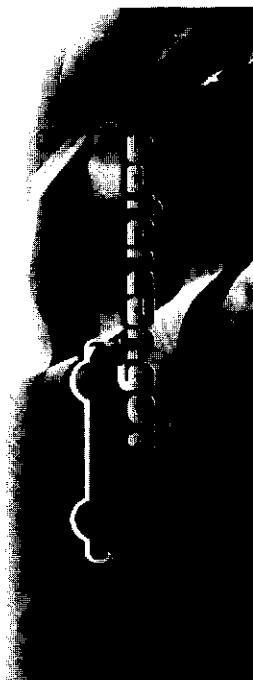
www.safercar.gov

or call:

**Vehicle Safety Hotline
888-327-4236**



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



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).