



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 MAY -2
07-APR-2006

Reference No.
10154799

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City BRIGHTON State MI 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
LJ4GW48N [REDACTED] Make JEEP Model GRAND CHEROKEE Model Year 2004
Date Purchased 01-APR-05 Dealer's Name and Telephone Number BRIGHTON CHRYSLER 810-229-4100 Engine: No: Cylinders 8 Fuel Type: Gas
Original Owner Dealer's City BRIGHTON State MI Zip Code 48116
Transmission Type AUTOMATIC Antilock Brakes Cruise Control Powertrain 4 WHEEL DRIVE Vehicle Component Code 221700 SEATS: FRONT ASSEMBLY: SEAT HEATER/COOLER
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 14-MAR-2006 Failure Mileage 64000 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: 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 1 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).

DT*: THE CONTACT STATED WHILE DRIVING AT NO PARTICULAR SPEED, THE HEATED SEAT WARMER BURNED THROUGH THE SEAT CUSHION WITHOUT WARNING. THE OCCUPANT SUSTAINED MINOR INJURIES FROM THE HEAT. ALTHOUGH NO VISIBLE FLAMES WERE PRESENT, THERE WAS SLIGHT CHARRING TO THE SEAT CUSHION AREA. THE VEHICLE WAS SEEN BY THE DEALER FOR REPLACEMENT OF THE HEATED SEAT ELEMENT AND CUSHION. THE DEALER DETERMINED THERE WAS AN INTERNAL SHORT OF THE SEAT WARMER.

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 responses 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 responses, or a statistical summary thereof, may be used in support of the agency's action.