Form Approved: O.M.B. No. 2127-0008

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: 02-NOV-2006 (NOV 30 AM 8:40)

Repository ☐

Reference No. 10172503

OWNER INFORMATION (Type or Print)

Name [redacted]

Addr [redacted]

City: LAMBERTVILLE | State: NJ | Zip Code [redacted]

Daytime Telephone Number [redacted]

Evening Telephone Number [redacted]

E-mail Address

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 [redacted] Date 11/7/06

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1J8GL58K62W[redacted]	JEEP	LIBERTY	~~2003~~ 2002

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
10-JUL-01	FLEMINGTON CHRYSLER DODGE JEEP 908 788 5858			No: Cylinders 6	Gas
Original Owner ☒	Dealer's City: FLEMINGTON	State: NJ	Zip Code: 08822		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed
15-SEP-2006	66000	0

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: DOTMAL9ABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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 UPON RECEIVING A RECALL LETTER # 03V46000 IN REGARDS TO THE FRONT SUSPENSION LOWER BALL JOINTS, THE DEALERSHIP WAS CONTACTED, WHO INDICATED THERE WAS A WAITING LIST FOR THE REQUIRED PARTS TO PERFORM THE RECALL REPAIR. AFTER A MONTH, THE PARTS HAD NOT ARRIVED YET. THE CONTACT WAS VERY CONCERNED BECAUSE THE RECALL CLEARLY ESTABLISHED THE SAFETY RISK INVOLVED IN THE SAFETY DEFECT.

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