



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

2006 DEC 28 AM 9:40
27-NOV-2006

Repository ☐

Reference No.
10174445

OWNER INFORMATION (Type or Print)

Name [REDACTED]

Address [REDACTED]

City CARNEGIE

State PA

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 ____/____/____

VEHICLE INFORMATION

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

1J4BL48K63 [REDACTED]

Make

JEEP

Model

LIBERTY

Model Year

2003

Date Purchased
30-MAY-06

Dealer's Name and Telephone Number
SOUTH HILLS CHRYSLER

Engine:

No: Cylinders 6

Fuel Type:

Gas

Original Owner

☐

Dealer's City

MCMURRAY

State

PA

Zip Code

15317

Transmission Type

AUTOMATIC

☐ Antilock Brakes

☒ Cruise Control

Powertrain

4 WHEEL DRIVE

Vehicle Component Code

021540 SUSPENSION:FRONT:CONTROL ARM:LOWER BALL JOINT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

27-OCT-2006

Failure Mileage

59000

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: DOTM4L9ABC036)

☐ 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

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 THERE WERE NO PROBLEMS WITH THE VEHICLE. THERE WAS A NHTSA RECALL, #06V288000 ON THE VEHICLE REGARDING THE FRONT LOWER BALL JOINT. THE PARTS NEEDED TO REPAIR THE VEHICLE WERE NOT AVAILABLE AT THE LOCAL DEALERSHIP.

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.