

From: [DataQuality, DataQuality \(NHTSA\)](#)
To: [EVOQ \(NHTSA\)](#)
Subject: FW: No edits necessary
Date: Friday, April 17, 2020 2:02:45 PM
Attachments: [REDACTED]

Questionnaire

From: [REDACTED]
Sent: Thursday, April 16, 2020 5:56 PM
To: DataQuality, DataQuality (NHTSA) <DataQuality@dot.gov>
Subject: No edits necessary



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
18-FEB-2020

Repository
Reference No.
11309938

OWNER INFORMATION (Type or Print)

Name [REDACTED]
Address [REDACTED]
City SOMERSET State NJ Zip Code [REDACTED]

Daytime Telephone Number [REDACTED]
Evening Telephone Number [REDACTED]

E-mail Address [REDACTED]

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1J4GW48S44C [REDACTED]
Make JEEP Model GRAND CHEROKEE Model Year 2004
Date Purchased Dealer's Name and Telephone Number Engine: No: Cylinders Fuel Type:
Original Owner Dealer's City State Zip Code
Transmission Type Antilock Brakes Cruise Control Powertrain Multiple Failure: Incident Date(s) 02-DEC-2018

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 140000 AIR BAGS 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: 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 Yes No Fire Yes No Number of Persons Injured 1 Number of Deaths Reported to Police Y

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).

TL* THE CONTACT OWNED A 2004 JEEP GRAND CHEROKEE. THE CONTACT STATED WHILE DRIVING AT AN UNKNOWN SPEED THE VEHICLE INDEPENDENTLY DRIFTED INTO THE RIGHT LANE AND THE CONTACT CORRECT THE VEHICLE DRIVING BACK INTO THE LEFT LANE. THE VEHICLE THEN STARTED TO SWAY IN AND SPUN OUT OF CONTROL COLLIDING WITH THE GUARDRAIL. THE CONTACT STATED THE AIR BAGS FAILED TO DEPLOY. THE CONTACT WAS TRANSPORTED TO THE HOSPITAL BY AMBULANCE AS SHE SUSTAINED WHIPLASH AND BRUISING. A POLICE REPORT WAS FILED. THE VEHICLE WAS TOWED TO A TOW LOT AND DEEMED A TOTAL LOSS. THE FAILURE MILEAGE WAS UNKNOWN. THE MANUFACTURER NOR LOCAL DEALER WAS NOT NOTIFIED OF THE FAILURE.

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 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.