



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](http://www.nhtsa.dot.gov/hotline)

**FOR AGENCY USE ONLY**

Date Received

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
od\_rt \_\_\_\_\_  
up\_lr \_\_\_\_\_

RECEIVED

09 APR 26 PM 2:58

Reference No.

DEFECTS INV

551979

**OWNER INFORMATION (Type or Print)**

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_

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 9/19/2000

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN) (17 Digits) 1JCMU734SH7017057		Make JEEP	Model CHEROKEE	Year 1987
Purchased Date 9-9-99	Dealer's Name PRIVATE OWNER	Engine Size (CID/DCAL) 40	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City POMP. BCH.	State FL	Zip Code 33064	No. Cylinders 6
Manufacture Date (on driver's door or pillar) UNKNOWN DESTROYED	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restrain. System <input type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Passengerside Air Bag <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> 2-Point Belt	Cruise Control Yes <input checked="" type="checkbox"/> No	Drivetrain <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
		Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> van <input type="checkbox"/> Minivan <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Sport Utility	Body Style <input checked="" type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

IN FIRE

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Part Name(s) DON'T KNOW	Location <input type="checkbox"/> Left <input checked="" type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s):	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No
		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured 0	Number of Facilities 0	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

THE VEHICLE STARTED LOSING SPEED, AND WAS RUNNING WARM. I PULLED OVER TO THE EMERGENCY LANE. SMOKE WAS COMING FROM UNDER THE HOOD. I TRIED TO POP THE HOOD, IT WOULD NOT. I GOT OUT OF THE VEHICLE AND THERE WAS SOME KIND OF LIQUID COMING FROM UNDER THE CAR. THERE WAS ALSO PIECES OF SOMETHING UNKNOWN (PROBABLY PIECES OF ENGINE) ON FIRE FALLING FROM THE

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration 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)

ENGINE. FROM THERE THE VEHICLE FRONT WENT UP IN FLAMES DESTROYING BASICLY THE WHOLE VEHICLE.

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, NSA-10.01 400 7th Street, SW Washington, DC 20590



Complete and return or place in your car manual for future use



VEHICLE OWNER'S

QUESTIONNAIRE

(V00Q)

DOT AUTO SAFETY HOTLINE

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DASH 2 DOT

and dial toll free at

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