



U.S. Department of Transportation  
National Highway Traffic Safety Administration

**POSTED**

**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)

**COPIED**

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

FOR AGENCY USE ONLY

Date Received

Order

DD

up\_itr

Reference No.

**561380**

**OWNER INFORMATION (Type or Print)**

Daytime Telephone Number

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

Date **05/24/2001**

**PRODUCT INFORMATION**

Vehicle Identification No. (VIN.) (Located at bottom of windshield on driver's side)		Make	Model	Year
1J4FY19P1SP303026		Jeep	Wrangler	1995
Purchased Date	Dealer's Name	Engine Size (CID/CC/L)	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel	
06/15/1998	Andy Glockner Toyota	230	<input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injector	
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's City	State	Zip Code	No. Cylinders
	Portsmouth	OH	45662	4
Manufacture Date (on driver's door or pillar)	Transmission Type	Restraint System	Cruise Control	Drivetrain
	<input checked="" type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Motorbelt <input type="checkbox"/> Passengerside Air Bag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> 9-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel
				Vehicle Type
				<input type="checkbox"/> Car <input checked="" type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other
				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

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

Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
Parking (emergency) brakes	<input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Front <input checked="" type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s)	Failed Part(s) Available?
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)	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	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).

Parking (emergency) brakes do not work correctly. Emergency brake foot engagement pedal dis-engages on its own at any random point in time. Pedal must be engaged all the way to function, and even at that point, the vehicle sometimes is not completely stable. Sometimes, the parking (emergency) brake rubs because it does not fully disengage. The parking (emergency) brake notification light is (over please)

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.

Mail postage free or fax to 202-366-7882

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

Continuously stuck in the on (or light on) position, and rarely turns off.

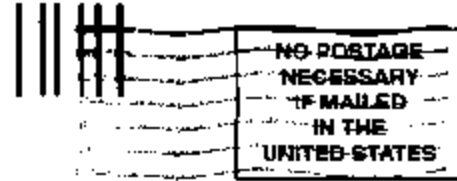
ATTACH ADDITIONAL SHEETS IF NECESSARY

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



**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73179 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**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH 2 DOT**

and dial toll free at

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