



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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY 798

Date Received

10-DEC-2001

Od_or

rt_dt

pd_rt

rp_lr

Reference No.

8000519

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Location at bottom of windshield and driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1J4FT67S4V;610175		JEEP	CHEROKEE	1997	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
☒ New ☐ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☐ No	☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☒ Yes ☐ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Util ☐ Truck ☐ Motorcycle
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 11913000	Part Name(s) LPG TANK GAUGE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 01-NOV-2001	Failed Part(s)	NHTSA Previously
	Mileage at Failure(s) 72	☐ Yes ☐ No	☐ Yes ☐ No
	Vehicle Speed at Failure(s)		

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATES THAT THE GAS GAUGE IN THE VEHICLE IS DEFECTIVE THE GAUGE WILL READ THAT THE FUEL TANK IS FUEL BUT THEN THE CONSUMER RUNS OUT OF GAS. PLEASE PROVIDE MORE INFORMATION.

COPIES OF THIS FORM ARE:

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.



U.S. Department of Transportation
National Highway Traffic Safety Administration
www.nhtsa.dot.gov/hotline
1-888-327-4236
NATIONWIDE 1-888-DASH-2-DOT
Vehicle Owner's Questionnaire (VOQ)

OWNER INFORMATION (Type or Print)

Reference No.
8000519

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
☒ YES ☐ NO
Signature _____
In the absence of the manufacturer, address to the vehicle manufacturer _____
Date 2/9/97

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 1J4FT67S4V610175
Vehicle Make JEEP
Vehicle Model CHEROKEE
Vehicle Year 1997
Current Odometer Reading 75538

Purchase Date 7/97
New ☒ Used ☐
Dealer's Name TAMANI Chevrolet Jeep
City Miami State FL Zip Code 33173
Transmission Type Antilock Brakes Restraint System
Automatic ☒ Manual ☐
Yes ☒ No ☐
3-Point Belt ☒ 2-Point Belt ☐
Motorcycle ☐ Passenger Side Airbag ☐
Yes ☒ No ☐
Vehicle Type Car ☒ Van ☐ Minivan ☐ Other ☐
Sport Utility ☒ Truck ☐ Motorcycle ☐
Body Style 2-Door ☒ 4-Door ☐ Station Wagon ☐ Truck ☐ Pick Up ☐
Fuel Type Gas ☒ Diesel ☐ Turbo ☐ Fuel Injection ☒

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 11913000
Part Name(s) LPG TANK GAUGE
Location Front ☒ Left ☒ Right ☐ Rear ☐
Failed Part(s) Original ☒ Replacement ☐
No of Failures
Date(s) of Failure(s) 01-NOV-2001
Mileage at Failure(s) 72
Vehicle Speed at Failure(s)
Failed Part(s) Yes ☒ No ☐
Previously Yes ☐ No ☐
NHTSA

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)
Crash Yes ☐ No ☒
Fire Yes ☐ No ☒
Number of Persons Injured
Number of Fatalities
Estimated Property Damage
Reported to Police Yes ☐ No ☒

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATES THAT THE GAS GAUGE IN THE VEHICLE IS DEFECTIVE THE GAUGE WILL READ THAT THE FUEL TANK IS FULL BUT THEN THE CONSUMER RUNS OUT OF GAS. PLEASE PROVIDE MORE INFORMATION.

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CONTINUE ON BACK IF NEEDED

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 708 Date Received FEB 27 2001 10-DEC-2001 Reference No. 8000519 Work Num Home Num	
OWNER INFORMATION (Type or Print) [Redacted] 729677			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorization, NHTSA will NOT provide your name and address to the vehicle manufacturer. Signature of Owner [Redacted] Date 12/27/01			
VEHICLE INFORMATION Vehicle Ident. No. (VIN) [Located at bottom of windshield on driver's side] 1J4FT67S4V;610175 Vehicle Make JEEP Vehicle Model CHEROKEE Vehicle Year 1997 Current Odometer Reading 75538			
Purchase Date 7/97 ☒ New ☐ Used		Dealer's Name TANIANI CHRYSLER JEEP City MIAMI State FL Zip Code 33172 Engine Size 1.6L/100/L No Cylinders 6 ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic		Antilock Brakes ☒ Yes ☐ No Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt Cruise Control ☒ Yes ☒ No Drive Type ☐ Front ☒ Rear ☐ 4-Wheel	
Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other		Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 11913000 Part Name(s) LPG TANK GAUGE		Location ☒ Left ☐ Front ☐ Right ☒ Rear Failed Part(s) ☒ Original ☐ Replacement	
No. of Failures Date(s) of Failure(s) 01-NOV-2001 Mileage at Failure(s) 72 Vehicle Speed at Failure(s)		Failed Part(s) ☒ Yes ☐ No NHTSA Previously ☐ Yes ☐ No	
APPLICATION INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)			
Crash ☐ Yes ☒ No		Fire ☐ Yes ☒ No	
Number of Persons Injured		Number of Fatalities	
Estimated Property Damage		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) CONSUMER STATES THAT THE GAS GAUGE IN THE VEHICLE IS DEFECTIVE THE GAUGE WILL READ THAT THE FUEL TANK IS FUEL BUT THEN THE CONSUMER RUNS OUT OF GAS. PLEASE PROVIDE MORE INFORMATION.			
CONTINUE ON BACK IF NEEDED			
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FOR AGENCY USE ONLY 1058

Date Received

12-SEP-2001

Od_or _____
rt_dt _____
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Reference No.

8000519

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Locate at bottom of windshield or driver's side) 2B4GP4438WR	Vehicle Make DODGE TRUCK	Vehicle Model GRAND CARAVA	Vehicle Year 1998	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L 6 CYL) No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☒ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05100000	Part Name(s) ENGINE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 1	Dates of Failure(s) 26-AUG-2001 Mileage at Failure(s) 80700 Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ Yes ☐ No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash ☐ Yes ☐ No	Fire ☒ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE CAUGHT ON FIRE IN THE ENGINE COMPARTMENT, CLAIM 20-5406-593. *SLC

COPIES OF REPORTS - FREE -

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NUMBER

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