

785631

[REDACTED]
To: Margaret Cauthorne
Date: 2/8/02 10:02AM
Subject: Re: Fwd: 1999 Jeep Cherokee-Delegated

I will call her this afternoon. Do you want the specifics concerning her park to reverse failures?
Thankx; Peter

>>> Margaret Cauthorne 02/07/02 03:07PM >>>

[REDACTED]
Let me know if you respond to this consumer, since this is your investigation.

EA-01-017.

Thanks

From: Margaret Cauthome
[REDACTED]
Subject: Re: 1999 Jeep Cherokee-Delegated

Thank you for your correspondence concerning your Jeep Cherokee. We regret any inconvenience our delay in responding to your correspondence may have caused you.

Your inquiry was forwarded to the investigating office.

>>> Gwapropos <NHTSA> 12/03/01 04:01PM >>>
MCauthome@nhtsa.dot.gov: Please do not reply to
gwapropos@nhtsa.dot.gov. Please respond To the author of the attached
letter (address embedded below), Or forward it To someone who can. Your
efforts are appreciated.

-----Original Message-----

From: WEBMASTER2@nhtsa.dot.gov [mailto:WEBMASTER2@nhtsa.dot.gov]
Sent: Monday, December 03, 2001 11:41 AM
To: gwapropos@nhtsa.dot.gov
Subject: 1999 Jeep Cherokee-Delegated <3800301.30138.2609.43/end>

[REDACTED]

I would like to converse with someone currently carrying out an investigation into a problem with jeep cherokees rolling backwards when in park. I had thiss trouble twice with my vehicle and now I have it again for the third time. This information may be usefull to your investigation. Could you please get back to me by e mail or by telephone at [REDACTED] and I can supply whatever information you require. tks in advance.

[REDACTED]



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 1058

Date Received

03-DEC-2001

Ord. or
rt. dt
pd. rt
rp. ltr

Reference No.

785631

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) <small>(Locate at bottom of windshield or driver's side)</small>	Vehicle Make JEEP	Vehicle Model CHEROKEE	Vehicle Year 1999	Current Odometer Reading		
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No. Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 07301000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:INTERLOCK SYSTEM	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failure 3	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

CONSUMER STATED WHILE THE VEHICLE WAS IN PARK, IT ROLLED BACKWARDS ON THREE OCCASIONS.*YH

CONTINUED ON REVERSE

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.