



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 436**

Date Received

17-DEC-2001

Od\_or \_\_\_\_\_  
rt\_dt \_\_\_\_\_  
pd\_rt \_\_\_\_\_  
rp\_lr \_\_\_\_\_

Reference No.

8000816

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1J4G258S1XC798751	JEEP	GRAND CHEROKE	1999			
Purchase Date <input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input checked="" 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	Dates of Failure(s) _____ 23-NOV-2001 Mileage at Failure(s) _____ 21000 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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### NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

VEHICLE WAS STARTED UP WITH MOTOR RUNNING. THEN, DOOR WAS OPENED, AND CONSUMER WAS STANDING ON OUTSIDE WHILE VEHICLE ROLLED IN REVERSE. CONSUMER'S VEHICLE HIT 2 OTHER VEHICLES IN ITS PATHWAY. \*AK

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

DOT Auto Safety Hotline  
**Vehicle Owner's Questionnaire (VOQ)**  
NATIONWIDE 1-888-DASH-2-DOT  
1-888-327-4236  
www.nhtsa.dot.gov/hotline

**FOR AGENCY USE ONLY** 438

Date Received: FEB -6 2001  
DEC-2001  
Reference No. 8D00816

**OWNER INFORMATION (Type or Print)**

[Redacted] 730497

Work [Redacted]  
Home [Redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorized signature, you must provide your name and address to the vehicle manufacturer.

Signature of Owner [Redacted] Date 1/05/02

**VEHICLE INFORMATION**

Vehicle Ident. No. (VIN) 1J4G258S1XC798751  
Vehicle Make JEEP  
Vehicle Model GRAND CHEROK  
Vehicle Year 1999  
Current Odometer Reading 24 000

Purchase Date Aug. 1999  
Dealer's Name Burger Motor Car Co.  
City West L. A. State CA Zip Code 90025  
Engine Size (CID/CC/L) 6  
No. Cylinders 6  
 Turbo Diesel Gas Fuel Injectio

Transmission Type  Automatic  
Antilock Brakes  Yes  
Restraint System  3-Point Belt  
Cruise Control  Yes  
Drive Train  Front 4-Wheel  
Vehicle Type  Sport Ult  
Body Style  2-Door

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

Component 07301000  
Part Name(s) POWER TRAIN: TRANSMISSION: AUTOMATIC: INTERLOCK SYSTEM  
Location  Left  Right  
Failed Part(s)  Original  
No. of Failures 1  
Date(s) of Failure(s) 23-NOV-2001  
Mileage at Failure(s) 21000  
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  
Fire  Yes  
Number of Persons Injured 1 (minor)  
Number of Fatalities 0  
Estimated Property Damage \$10,000  
Reported to Police  Yes  No

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

VEHICLE WAS STARTED UP WITH MOTOR RUNNING. THEN, DOOR WAS OPENED, AND CONSUMER WAS STANDING ON OUTSIDE WHILE VEHICLE ROLLED IN REVERSE. CONSUMER'S VEHICLE HIT 2 OTHER VEHICLES IN ITS PATHWAY. \*AK

\* VEHICLE WAS PUT IN "PARK" MODE, THEN DOOR WAS OPENED TO BRIEFLY RETRIEVE PLASTIC CARD THAT HAD DROPPED. I WAS STANDING BESIDE VEHICLE WHEN IT ROLLED INTO REVERSE AND KNOCKED ME TO THE PAVEMENT AND HIT 2 OTHER

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.

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.\*

D O T

MANUFACTURER/TIRE NAME

SIZE

\* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

VEHICLES IN THE VICINITY.

☆ U.S. G.P.O.: 1982-623-897 / 60096

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



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