



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-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8001907

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 and door hinge) N/A	Vehicle Make JEEP	Vehicle Model GRAND CHEROKE	Vehicle Year 1996	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ 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 07301000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:INTERLOCK SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 01-DEC-1998 Mileage at Failure(s) 71000 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)

AFTER STARTING VEHICLE IT MOVES BACKWARDS BEFORE SHIFTING INTO GEAR. THIS PROBLEM OCCURS ONLY AFTER THE VEHICLE HAS BEEN STARTED. DEALER HAS BEEN CONTACTED. NLM

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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.

 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 798 Date Received: <u>FEB 21 19 2002</u> Defect: <u>NO</u> Reference No.: <u>8001307</u> Work Number: _____ Home Number: _____	
OWNER INFORMATION (Type or Print) [Redacted] 733118		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer. Signature of Owner: [Redacted] ☒ YES ☐ NO Date: <u>1/24/2002</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>N/A 1J4E27851C112688</u>		Vehicle Make: <u>JEEP</u> Vehicle Model: <u>GRAND CHEROK</u> Vehicle Year: <u>1996</u> Current Odometer Reading: _____	
Purchase Date: <u>12-98</u> ☐ New ☒ Used		Dealer's Name: <u>Auto Brite</u> City: <u>SAGINAW</u> State: <u>MI</u> Zip Code: <u>48602</u> Engine Size (CID/CC/L): <u>6</u> 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 Belt ☐ Passengerside Airbag Cruise Control: ☐ Yes ☒ No Drive Train: ☐ Front ☐ Rear ☒ 4-Wheel	
Vehicle Type: ☐ Car ☐ Van ☐ Sport Utility Truck ☐ Minivan ☐ Motorcycle ☐ Other		Body Style: ☐ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up ☒ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component: <u>97391006</u> Part Name(s): <u>POWER TRAIN: TRANSMISSION: AUTOMATIC: INTERLOCK SYSTEM</u> Location: ☐ Left ☐ Right ☐ Front ☐ Rear		Failed Part(s): ☐ Original ☐ Replacement	
No. of Failures: <u>2 more to count</u> Date(s) of Failure(s): <u>01-DEC-1998</u> Mileage at Failure(s): <u>7000</u> Vehicle Speed at Failure(s): <u>0</u>		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: <u>Grand Baby Behind Vehicle almost hit</u> Number of Fatalities: _____ Estimated Property Damage: _____ Reported to Police: ☐ Yes ☐ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) AFTER STARTING VEHICLE IT MOVES BACKWARDS BEFORE SHIFTING INTO GEAR. THIS PROBLEM OCCURS ONLY AFTER THE VEHICLE HAS BEEN STARTED. DEALER HAS BEEN CONTACTED. NLM			
CONTINUE ON BACK IF NEEDED			
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INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO. 1

DOT

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)

mostly goes backward sometimes it rocks
like forward & backward at start up. from talking
to others I am not alone

生物性炭の土壌改良効果

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

400 Seventh St., S.W.
Washington, D.C. 20590

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