



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 936**

Date Received

17-JAN-2002

Od. or  
rt. dt  
pd. rt  
rp. ltr

Reference No.

8002388

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)<br><small>(Location at bottom of<br/>and/or above windshield)</small> | Vehicle Make   | Vehicle Model  | Vehicle Year  | Current Odometer Reading   |   |  |
| 1J4FF68S4XL658926  | JEEP   | CHEROKEE   | 1999  |  |   |  |
| Purchase Date<br><input type="checkbox"/> New <input checked="" type="checkbox"/> Used         | Dealer's Name<br>City _____ State _____ Zip Code _____                         | Engine Size<br>(CID/CC/L) _____<br>No. Cylinders _____   | <input type="checkbox"/> Turbo<br><input type="checkbox"/> Diesel<br><input type="checkbox"/> Gas<br><input type="checkbox"/> Fuel Injectio |  |   |  |
| Transmission Type<br><input type="checkbox"/> Manual<br><input type="checkbox"/> Automatic     | Antilock Brakes<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No | Restraint System<br><input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt<br><input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel<br><input type="checkbox"/> Passengerside Airbag | Cruise Control<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No   | Drive Train<br><input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input type="checkbox"/> 4-Wheel | Vehicle Type<br><input type="checkbox"/> Car <input type="checkbox"/> Sport Util<br><input type="checkbox"/> Van <input type="checkbox"/> Truck<br><input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle<br><input type="checkbox"/> Other _____ | Body Style<br><input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up Truck<br><input checked="" type="checkbox"/> Other _____ |

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

|                                   |   |  |  |
|-----------------------------------|---|--|--|
| Component<br>05100000<br>12420000 | Part Name(s)<br>ENGINE<br>INTERIOR SYSTEMS:INSTRUMENT PANEL:GAUGE:INDICATOR                                     | Location<br><input type="checkbox"/> Left <input type="checkbox"/> Right<br><input type="checkbox"/> Front <input type="checkbox"/> Rear | Failed Part's<br><input type="checkbox"/> Original<br><input type="checkbox"/> Replacement |
| No of Failure                     | Dates of Failure(s) _____ 15-JAN-2002<br>Mileage at Failure(s) _____ 38000<br>Vehicle Speed at Failure(s) _____ | Failed Part(s)<br><input type="checkbox"/> Yes <input type="checkbox"/> No   | NHTSA Previously<br><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<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Fire<br><input type="checkbox"/> Yes <input type="checkbox"/> No | Number of Persons Injured | Number of Fatalities | Estimated Property Damag | Reported to Polic<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|---------------------------|----------------------|--------------------------|---|

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

**ENGINE LIGHT CAME ON AND THE VEHICLE DIED. VEHICLE WAS TOWED TO DEALER. PLEASE PROVIDE ANY FURTHER INFORMATION.\*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.

| DOT Auto Safety Hotline   |  | FOR AGENCY USE ONLY 335   |  |
|---|--|---|--|
|  U.S. Department of Transportation<br>National Highway Traffic Safety Administration   |  | <b>Vehicle Owner's Questionnaire (VOQ)</b><br>NAT:ONWIDE 1-888-DASH-2-DOT<br>1-888-327-4236<br>www.nhtsa.dot.gov/hotline  |  |
| OWNER INFORMATION (If known)  |  | Date Received: <u>02 JAN 2002</u><br>OFFICE DEFECTS INVESTIGATION<br>Reference No. <u>8002388</u>   |  |
| [Redacted] <u>734395</u><br><b>E. LANSING MI</b>  |  | Work Number [Redacted]<br>Home Number [Redacted]  |  |
| Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?<br>In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.  |  | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO<br>Date <u>2/8/02</u>   |  |
| Signature of Owner [Redacted]   |  |   |  |
| VEHICLE INFORMATION   |  |   |  |
| Vehicle Ident. No. (VIN)<br><small>(Windshield on driver's side)</small>  | Vehicle Make   | Vehicle Model   | Vehicle Year   |
| <u>1J4FF68S4XL858926</u>  | <u>JEEP</u>  | <u>CHEROKEE</u>   | <u>1999</u>  |
| Purchase Date<br><u>9-24-99</u>   | Dealer's Name<br><u>Bob Baker Jeep</u>   |   | Current Odometer Reading<br><u>39,800</u>  |
| <input checked="" type="checkbox"/> New <input type="checkbox"/> Used   | City<br><u>Carlsbad</u>  | State<br><u>CA</u>  | Zip Code   |
| Transmission Type   | Antilock Brakes  | Restraint System  | Engine Size (CID/GCC/L)  |
| <input type="checkbox"/> Manual<br><input checked="" type="checkbox"/> Automatic  | <input type="checkbox"/> Yes<br><input checked="" type="checkbox"/> No   | <input type="checkbox"/> 3-Point Belt<br><input checked="" type="checkbox"/> Driverside Airbag<br><input checked="" type="checkbox"/> Passengerside Airbag<br><input type="checkbox"/> Motorbelt<br><input type="checkbox"/> 2-Point Belt | <u>?</u>   |
| Cruise Control  | Drive Train  | Vehicle Type  | Body Style   |
| <input checked="" type="checkbox"/> Yes<br><input type="checkbox"/> No  | <input type="checkbox"/> Front<br><input type="checkbox"/> Rear<br><input checked="" type="checkbox"/> 4-Wheel | <input type="checkbox"/> Car<br><input type="checkbox"/> Van<br><input type="checkbox"/> Minivan<br><input type="checkbox"/> Other<br><input checked="" type="checkbox"/> Sport Utility Truck<br><input type="checkbox"/> Motorcycle      | <input type="checkbox"/> 2-Door<br><input type="checkbox"/> 4-Door<br><input type="checkbox"/> Stationwagon<br><input type="checkbox"/> Pick Up<br><input checked="" type="checkbox"/> Truck |
| FAILED COMPONENT(S)/PART(S) INFORMATION   |  |   |  |
| Component<br><u>05100000</u><br><u>12420000</u>   | Part Name(s)<br><u>ENGINE</u><br><u>INTERIOR SYSTEMS, INSTRUMENT PANEL, GAUGE, INDICATOR</u>                   | Location<br><input type="checkbox"/> Left<br><input checked="" type="checkbox"/> Front<br><input type="checkbox"/> Right<br><input type="checkbox"/> Rear   | Failed Part(s)<br><input type="checkbox"/> Original<br><input checked="" type="checkbox"/> Replacement   |
| No of Failures<br><u>1</u>  | Date(s) of Failure(s)<br><u>28 Dec. 2001</u>   | Mileage at Failure(s)<br><u>38000</u>   | Vehicle Speed at Failure(s)<br><u>70 mph</u>   |
|   |  | Failed Part(s)<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   | NHTSA Previously<br><input type="checkbox"/> Yes <input checked="" 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<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  | Fire<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                    | Number of Persons Injured<br><u>0</u>   | Number of Fatalities<br><u>0</u>   |
| Estimated Property Damage<br><u>0</u>   |  | Reported to Police<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><u>Attorney General</u>  |  |
| NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)   |  |   |  |
| <p>ENGINE LIGHT CAME ON AND THE VEHICLE DIED. VEHICLE WAS TOWED TO DEALER. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK I was driving at 70 mph on highway. Engine came on. I exited highway and parked within two minutes. I could not stop on highway, as it was cold, dark, and dangerous. Car was smoking and would not start again. Chrysler blames me and says I drove the car when it was overheated.</p>   |  |   |  |
| CONTINUE ON BACK IF NEEDED  |  |   |  |
| The Privacy Act of 1974 (Public Law 93-57): 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 staples 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)

The freeze plug malfunctioned and the #5 piston melted. No "overheat" light ever came on.

Chrysler refuses to admit the freeze plug and "overheat" light may be defective.

I had to pay Chrysler \$3500 to fix the car.

Situation with car on highway was very dangerous, and yet Chrysler blames me for damages because I drove the car with engine light ~~lighting~~ for 2 minutes.

I am scared to drive this car and am angry that Chrysler refuses to be responsible for damages.

★ U.S.G.P.O.: 1992-822-867/82288

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



NO POSTAGE  
NECESSARY  
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IN THE  
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POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
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Washington, DC 20590

