

U.S. Department
of TransportationNational 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 151

Date Received

19-NOV-1999

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

853163

 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) _____ (located at front of windshield on driver's side)	Vehicle Make JEEP	Vehicle Model CHEROKEE	Vehicle Year 1990	Current Odometer Reading
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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 ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12310000	Part Name(s) INTERIOR SYSTEMS: SEAT TRACKS AND ANCHORS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

THE WELDS TO THE SEAT TRACKS ON DRIVER'S SEAT BROKE. DRIVER HAS TO KEEP REAR SEAT DOWN IN ORDER TO BRACE FRONT SEAT. DEALER SAID SEAT NEEDS TO BE REPLACED. *AK

CONTINUED ON BACK (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.

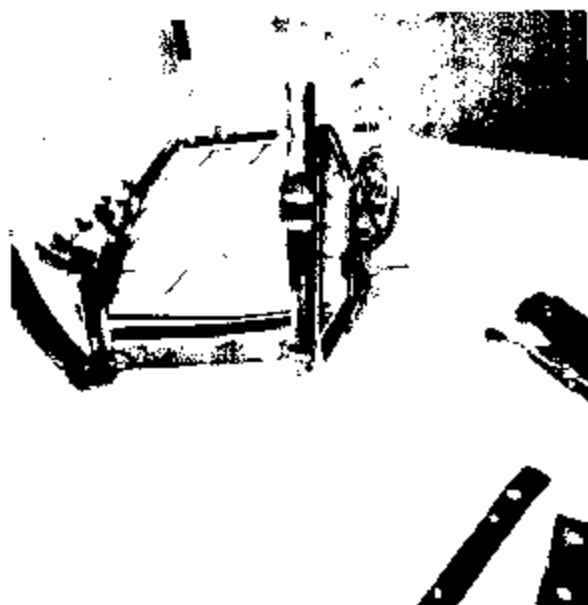
 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire Auto Safety Hotline NATIONWIDE 1-800-424-9393 DC METRO AREA (202) 366-0123 INTERNET: http://www.nhtsa.dot.gov		Date Received: 02 FEB - 6 AM 11:38 19 NOV 1999 ST. LOUIS INVESTIGATION Reference No. 853163 Work Number Home Number		Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorized representative, please provide your name and address to the vehicle manufacturer.		Signature of Owner [Redacted]	
VEHICLE INFORMATION									
Vehicle Make JEEP		Vehicle Model CHEROKEE		Vehicle Year 1990		Current Odometer Reading 143747		Purchase Date 154F558L7LL56314 154F558L7LL56314	
Dealer's Name Braeger		City Milw.		State WI		Zip Code 53211		New ☐ Used ☒	
Fuel Injection ☐ Gas ☒ Diesel ☐ Turbo		Engine Size No Cylinders 4		Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other		Vehicle Style ☒ 2-Door ☐ 4-Door ☐ Station Wagon ☐ Pick Up Truck ☐ Other		Transmission Type ☒ Automatic ☐ Manual	
Restraint System ☐ 3-Point Belt ☐ Motorized ☒ 2-Point Belt		Cruise Control ☐ Yes ☒ No		Drive Train ☐ Front ☐ Rear ☒ 4-Wheel		Location ☒ Left ☐ Right ☐ Rear ☐ Front		Failed Part(s) ☒ Original ☐ Replacement	
FAILED COMPONENT(S)/PART(S) INFORMATION									
Component 12310000		Part Name(s) INTERIOR SYSTEMS: SEAT TRACKS AND ANCHORS		Date(s) of Failure(s) Approx 1997		Mileage at Failure(s) Approx 125000		No of Failures 1	
Application Incident Information (Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)		Vehicle Speed at Failure(s) AS MUCH AS STOP		Failed Part(s) Available? ☒ Yes ☐ No		NHTSA Previously Contacted? ☐ Yes ☐ No		Crash ☐ Yes ☒ No	
Fire ☐ Yes ☒ No		Number of Persons Injured 0		Number of Failures 0		Estimated Property Damage \$350,000		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)									
THE WELDS TO THE SEAT TRACKS ON DRIVER'S SEAT BROKE. DRIVER HAS TO KEEP SEAT DOWN IN ORDER TO BRACE FRONT SEAT. DEALER SAID SEAT NEEDS TO BE REPLACED. *AK									
CONTINUE ON BACK IF NEEDED									
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Figure 1



Figure 1. A person lying on a bed, looking up at the camera.





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FOR AGENCY USE ONLY 118

Date Received

00 FEB -8 AM
13-JAN-2000
OFFICE
EFFECTS INVESTIGATION

On or
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ATION

Reference No.

854960

OWNER INFORMATION (Type or Print)

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an authorized signature, your name and address to the vehicle manufacturer.

☒ YES ☐ NO

Signature of Owner

Date 1/25/2000

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FMDU32X5NUB92075	FORD TRUCK	EXPLORER	1992	88,500

Purchase Date

Dealer's Name

Engine Size
(CID/CC/L)

4.0L

☐ Turbo
☐ Diesel
☐ Gas
☒ Fuel Injection

☒ New ☐ Used

City State Zip Code

No Cylinders

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Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other	☒ Sport Ult ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 12250000	Part Name(s) INTERIOR SYSTEMS: ACTIVE RESTRAINTS: BELT BUCKLES	Location ☒ Left ☐ Right ☒ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) 11-NOV-1999 Mileage at Failure(s) 87500 Vehicle Speed at Failure(s)	Failed Part(s) Available? ☐ Yes ☒ No	NHTSA Previously Contacted? ☐ 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
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

SEAT BELT ON DRIVER'S SIDE WILL NOT BUCKLE. SPRING INSIDE THE FEMALE PART IS BROKEN. DEALER WAS CONTACTED ABOUT THE PROBLEM. THE PART TO CORRECT THE PROBLEM IS ON BACK ORDER UNTIL FEBRUARY 1, 1999. PART # F2TZ7861203D. PLEASE PROVIDE ANY FURTHER INFORMATION. *AK

Within 4 days after reporting this problem to Ford Motor company & NHTSA the part was sponsored delivered and installed.

CONTINUE ON BACK IF NEEDED

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