

U.S. Department
of TransportationNational 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 437

Data Received

08-MAR-2000

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

858141

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>(Listed at front of windshield or drivers side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1J4GW68N4XC 80075	JEEP	GRAND CHEROKEE	1999	

Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> Passengerside Airbag <input type="checkbox"/> Motorbell <input type="checkbox"/> 2-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Other _____ <input type="checkbox"/> Sport Ult <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle	<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 05100000	Part Name(s) ENGINE	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 Failures	Date(s) of Failure(s) 08-FEB-2000 Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <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 checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	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)

WHEN STOPPING VEHICLE IDLES AND SHUTS DOWN, AND THERE ARE NO WARNING LIGHTS. *AK

CONTINUED ON BACK PLEASE

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 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 437 Date Received 08-MAR-2000 EFFECTIVE DATE		Of or rt dt od rt up the LOCATION		
OWNER INFORMATION (Type or Print) [Redacted] 595096				Reference No. 858141				
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.				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
Signature of Owner <u>[Signature]</u>				Date <u>03/14/00</u>				
VEHICLE INFORMATION								
Vehicle ident. No. (VIN) (located at bottom of windshield on driver's side) 1J4GW68N4XC 800755		Vehicle Make JEEP	Vehicle Model GRAND CHEROK	Vehicle Year 1999	Current Odometer Reading 13040			
Purchase Date 8-3-99		Dealer's Name <u>HERITAGE 1800 Old Richmond Hwy</u> <u>(Purchase At)</u>		Engine Size (CID/CC/L) 4.7L		<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
<input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used		City <u>ALEXANDRIA</u> State <u>VA</u> Zip Code <u>22303</u>		No Cylinders <u>8</u>				
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic		Antilock Brakes <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input checked="" type="checkbox"/> Passengerside Airbag		Cruise Control <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input checked="" 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 05100000	Part Name(s) ENGINE			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 Failures 8	Date(s) of Failure(s) <u>08-FEB-2000</u> Mileage at Failure(s) Vehicle Speed at Failure(s)			Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No		NHTSA Previously Contacted? <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 checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)								
WHEN STOPPING VEHICLE IDLES AND SHUTS DOWN, AND THERE ARE NO WARNING LIGHTS. *AK								
CONTINUE ON BACK IF NEEDED								
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8567790383

110556

LENIHAN OLDSMOBILE JEEP

INVOICE



Oldsmobile

DEALER ID: 035 4

Route 73 South

MARLTON, N.J. 08053

N.J. (866) 893-3800

www.lenihanauto.com



DEALER # 23185

PAGE 1

SERVICE ADVISOR: 184 JOSEPH GRESH

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG
BLACK	1999	JEEP GRAND CHEROKEE	1J4GW58N4XC800755	JND33C	10011/0011	26223
IN SERVICE DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	INV. DATE	
01JAN1999			17:00 12JAN00		12JAN2000	
DATE VEHICLE RECEIVED FOR REPAIR	DATE OWNER NOTIFIED OF REPAIR COMPLETION	OPTIONS:				
07:44 12JAN00	10:06 12JAN00					

LINE	OPCODE	TECH	TYPE	HOURS	LIST	NET	TOTAL
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A CUST STATES T HE ENGINE HAS A ROUGH IDLE. EIDLE IS ERRATIC AT TIMES-FEELS LIKE IT'S GOING TO STALL. WHEN MAKING PARKING LOT TURNS THE ENGINE WILL STALL AT TIMES. LAST TIME WAS OVER THE WEEKEND...

CAUSE: UNABLE TO REPRODUCE CUSTOMER CONCERN
 OP4 8541YE0C TEST PFI SYSTEM...UNABLE TO RE-PRODUCE CUSTOMER CONCERN

273WCE40 0.50
 FC: YH FART#: COUNT:
 CLAIM TYPE:
 AUTH CODE:
 0543

(N/C)

LIMITED LABOR WARRANTY

The Repair Facility guarantees the labor listed in performing the repairs listed on the front of the Repair Order for a period of 30 days or 3,000 miles (whichever comes first) from the date such repairs were completed. This Limited Warranty specifically excludes: trunk and alignments, electrical wiring and shorts, and fuel system - when due to contamination. This Limited Warranty is extended to the vehicle owner/customer and is not transferable to, nor enforceable by, any other person. During the duration period of this Limited Warranty, the Repair Facility will provide additional labor, at no expense to customer, for any additional repairs that are necessitated as a result of any defect in labor performed while completing the repairs listed on the front of the Repair Order. To obtain repairs under this Limited Warranty, customer must: (a) notify the Repair Facility at the address shown on the front of the Repair Order of any defect in labor within a reasonable time after customer discovers or should have discovered any such defect. Such notice, however, must be given to the Repair Facility before the end of the duration period of this Limited Warranty, as specified above; (b) deliver the vehicle to the Repair Facility at the address shown on the front of the Repair Order within five (5) days of notice of such defect in labor; (c) authorize the Repair Facility to make the repairs required; and (d) pay the charges for any additional parts required together with applicable sales tax upon completion of such repair. All implied warranties, including the implied warranties of merchantability and fitness for a particular purpose, are limited to the duration period of this limited warranty. Under no circumstances will the Repair Facility be liable to customer for any incidental or consequential damages including, but not limited to, damages for loss of property, loss of vehicle use, loss of time, loss of income and profits, inconvenience or commercial loss.

DESCRIPTION	TOTALS
LABOR AMOUNT	0.00
PARTS AMOUNT	0.00
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
E.P.A. DISPOSAL CHARGE	0.00
TOTAL CHARGES	0.00
LESS INSURANCE	0.00
SALES TAX	0.00
PLEASE PAY THIS AMOUNT	0.00

CUSTOMER COPY