

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 197

Date Received

10-AUG-2000

 Od\_or \_\_\_\_\_  
 rt\_dt \_\_\_\_\_  
 od\_rt \_\_\_\_\_  
 up\_ltr \_\_\_\_\_

Reference No.

867418

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>(located at bottom of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
	JEEP	CHEROKEE	1996	

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

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"/> Inlulubell <input checked="" 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 type="checkbox"/> Other

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

Component 02740000	Part Name(s) TIRES: TREAD	Location	Failed Part(s)
		<input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	<input type="checkbox"/> Original <input type="checkbox"/> Replacement

No. of Failures 0	Date(s) of Failure(s) 00-AUG-2000	Mileage at Failure(s) 77000	Vehicle Speed at Failure(s) 0	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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## APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)

Crash	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	0	0		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

CONSUMER STATED THAT WHILE DRIVING ABOUT 70 MPH WHEN SUDDENLY A LOUD SOUND CAME FROM THE RIGHT REAR TIRE AND KEEPING CONTROL OF VEHICLE WHERE THE TREAD SEPARATE DAMAGING THE VEHICLE REAR.

CONTINUED ON BACK IF NEEDED

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 <b>Vehicle Owner's Questionnaire (VOQ)</b> NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 197													
		Date Received		00 AUG 29 PM 1:57 10-AUG-2000													
		OFFICE		Od_or _____ rt_dt _____ od_rt _____ up_lr _____													
OWNER INFORMATION (Type or Print)		DEFECTS INVESTIGATION		Reference No. 867418													
		Work Number															
		Home Number															
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.																	
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1J4FJ28S9TL191164		JEEP	CHEROKEE	1996	77,791												
Purchase Date	Dealer's Name	Engine Size (CID/CC/L)	Turbo	Diesel	Gas												
UNKNOWN	UNKNOWN - US GOV'T FLEET VEHICLE	4.0L	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>												
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<table border="1"> <thead> <tr> <th colspan="4">FAILED COMPONENT(S)/PART(S) INFORMATION</th> </tr> <tr> <th>Component</th> <th>Part Name(s)</th> <th>Location</th> <th>Failed Part(s)</th> </tr> </thead> <tbody> <tr> <td>02740000</td> <td>FIRESONE ATK P225 75R15 TIRES:TREAD DOT HYHH ATS 456 — TREAD SEPARATION</td> <td><input type="checkbox"/> Left <input type="checkbox"/> Front <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Rear</td> <td><input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement</td> </tr> </tbody> </table>						FAILED COMPONENT(S)/PART(S) INFORMATION				Component	Part Name(s)	Location	Failed Part(s)	02740000	FIRESONE ATK P225 75R15 TIRES:TREAD DOT HYHH ATS 456 — TREAD SEPARATION	<input type="checkbox"/> Left <input type="checkbox"/> Front <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	<input type="checkbox"/> Original <input checked="" type="checkbox"/> Replacement
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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	H	Y	H	H	A	T	5	4	5	6	MANUFACTURER/TIRE NAME FIRESTONE ATX	SIZE P225 75 R15
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---------------------

\* 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)

8/8/2000-TREAD SEPARATED FROM TIRE SUDDENLY CAUSING LOSS OF CONTROL OF VEHICLE. INCIDENT OCCURRED AT APPROXIMATELY 6PM PACIFIC TIME ON I-10 NEAR VICKSBURG, AZ. I WAS ABLE TO REGAIN CONTROL OF VEHICLE WITHOUT ACCIDENT. THIS WAS THE RIGHT REAR TIRE. IT HAD BEEN PREVIOUSLY REPAIRED (PATCHED) I BELIEVE, BECAUSE CANYON MARKS ON TIRE ARE AT THE STEM AND WHEEL-WEIGHT LOCATIONS. FOR THIS REASON TIRE MAY HAVE NOT BEEN HOLDING PRESSURE ADEQUATELY. TIRE APPEARED TO BE HOLDING AIR PRESSURE STILL EVEN 2 DAYS AFTER THE INCIDENT; AT THIS TIME TIRE PRESSURE READ 20 PSI. I CHECKED THE TIRE 1 WEEK LATER AND IT WAS FLAT. THE REMAINING TIRES WERE ADEQUATELY PRESSURIZED.

☆ U.S. G.P.O. 1992-623-007/80238

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

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

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Penalty for Private Use \$300



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U.S. Department of Transportation  
National Highway Traffic Safety Administration  
**Information Management Staff NSA-10.01**  
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Washington, DC 20590

