



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 920

Date Received

06-JUL-2001

Ord. or

rt. dt

pd. rt

rp. ltr

Reference No.

892068

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>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1J4GW58S0XC607289	JEEP	GRAND CHEROKE	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 Injectio			
<input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	<input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	<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 07301000	Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:INTERLOCK SYSTEM	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 Failure	Date(s) of Failure(s) 15-JAN-2001 36000 Mileage at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 1	Number of Fatalities 0	Estimated Property Damag	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 VEHICLE WAS IN PARKED AND IDLING CONSUMER WENT TO EXIT VEHICLE AND WALKED AROUND THE DOOR. SHE ATTEMPTED TO JUMP BACK INTO VEHICLE WHEN IT STARTED MOVING IN REVERSE, AND SHE WAS THROWN FROM VEHICLE. SHE SUFFERED BRUISES, AND WAS ALMOST RUN OVER. VEHICLE WAS STOPPED BY RUNNING INTO A BRICK MAILBOX. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.\*AK

CONTINUE ON 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.



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

#### OWNER INFORMATION (Type or Print)

700691

Work Number  
Home No.

Reference No. 882068

Date Received  
01 AUG - 06 JUL 2001  
OFFICE OF DEFECTS INVESTIGATION

FOR AGENCY USE ONLY 920

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

#### VEHICLE INFORMATION

Vehicle Ident. No. (VIN) 1J4GW58S0XC607289

Vehicle Make JEEP

Vehicle Model GRAND CHEROK

Vehicle Year 1999

Current Odometer Reading 39,500

Purchase Date 1/28/99

Dealer's Name LET SPORTS CARS JEEP

Engine Size (CID/CYL) 4 LITER 6

Fuel Type Gas

New  Used

City/Town/State/Zip Code MI/FL 32578

No. Cylinders

Fuel Injection

Antilock Brakes  Yes  No

Restraint System

3-Point Belt  Motorbelt  2-Point Belt

Cruise Control  Drive Train

Vehicle Type  Sport Ute  Truck  Minivan  Van  Car  Other

Body Style  2-Door  4-Door  Stationwagon  Pick Up Truck  Other

Component 07301000

Part Name(s) POWER TRAIN:TRANSMISSION:AUTOMATIC:INTERLOCK SYSTEM

Location  Front  Rear  Left  Right

Failed Part(s)  Original  Replacement

No. of Failures

Date(s) of Failure(s) 15-JAN-2001

Mileage at Failure(s) 36000

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 1

Number of Failures 0

Estimated Property Damage \$5,000.00

Reported to Police  Yes  No

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

WHEN VEHICLE WAS IN PARKED AND IDLING CONSUMER WENT TO EXIT VEHICLE AND WALKED AROUND THE DOOR. SHE ATTEMPTED TO JUMP BACK INTO VEHICLE WHEN IT STARTED MOVING IN REVERSE, AND SHE WAS THROWN FROM VEHICLE. SHE SUFFERED BRUISES, AND WAS ALMOST RUN OVER. VEHICLE WAS STOPPED BY RUNNING INTO A BRICK MAILBOX. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS, IF ANY.

CONTINUE ON BACK OF CARD

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.