



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 231

Date Received

11-OCT-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

897607

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) (Location at bottom of windshield and driver's side door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1J4GZ58S9VC629862	JEEP	GRAND CHEROKE	1997	
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type ☐ Car ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03273000	Part Name(s) BRAKES:HYDRAULIC:DISC:ROTOR:DISC HUB	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) _____ Mileage at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE TRAVELING HEARD NOISE COMING FROM LEFT REAR WHEEL. DEALER WAS CONTACTED, AND STATED THAT ROTORS WERE WARPED AND NEEDED TO BE REPLACED. PLEASE PROVIDE FURTHER INFORMATION. *AK

COPIES OF REPORTS - FREE -

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
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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

231

Date Received

OCT-2001

 Od_or
rt_dt
od_rt
up_ltr

Reference No.

697607

OWNER INFORMATION (Type or Print)

719544

Work Number

Home Num

 Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an

address to the vehicle manufacturer.

☒ YES ☐ NO

Date 10/22/01

Signature of Owner

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (located on front of windshield on driver's side)

1J4GZ58S9VC629862

Vehicle Make

JEEP

Vehicle Model

GRAND CHEROK

Vehicle Year

1997

Current Odometer Reading

65000

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

Antilock Brakes

Restraint System

Cruise Control

Drive Train

Vehicle Type

Body Style

☐ Manual

☐ Yes

☐ 3-Point Belt

☐ Motorbelt

☐ Yes

☐ Front

☐ Car

☒ Sport Jlt

☐ 2-Door

☒ Automatic

☒ No

☒ Driverside Airbag

☐ 2-Point Belt

☒ No

☒ Rear

☐ Minivan

☐ Motorcycle

☐ Stationwagon

☐ Passengerside Airbag

☐ Other

☐ Pick Up

☐ Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component:
03273000

Part Name(s)

BRAKES:HYDRAULIC:DISC:ROTOR:DISC HUB

Location

☒ Left

☐ Front

☒ Right

☐ 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)

☐ Yes ☐ No

NHTSA Previously

☐ 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

Fire

Number of Persons Injured

Number of Fatalities

Estimated Property Damage

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

☐ Yes ☒ No

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

WHILE TRAVELING HEARD NOISE COMING FROM LEFT REAR WHEEL. DEALER WAS CONTACTED, AND STATED THAT ROTORS WERE WARPED AND NEEDED TO BE REPLACED. PLEASE PROVIDE FURTHER INFORMATION. *AK

CONTINUE ON BACK IF NEEDED

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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

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)

DUE TO REAR ROTORS BEING WARPED
FROM FACTORY / WORE DOWN BRAKES
AND CAUSED AXLE BEARINGS & SEALS,
CARRIER BEARINGS & SEALS, AND
PINTON BEARINGS & SEALS TO
GO BAD / HAD TO HAVE ALL OF
ABOVE REPLACED & ALSO, ROTORS
& BRAKES IN REAR.

★ U.S. G.P.O. 1992-522-897/60086

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

GARDEN RAILROAD AT PHIPPS 102 10/23/1992

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

20390+0001

