



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

DOT Auto Safety Hotline  
**Vehicle Owner's Questionnaire**  
To Report Vehicle Safety Defects  
1-888-DASH-2-DOT  
(1-888-327-4236)  
INTERNET: [www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

FOR AGENCY USE ONLY

Date Received

Repository ☐

20-DEC-2002

Reference No.  
10001346

OFFICE

DEFECT INVESTIGATION

Daytime Telephone Number

E-mail Address

Evening Telephone Number

OWNER INFORMATION (Type or Print)

Name

Address

City

WANTAGH

State

NY

Zip Code

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO

In the absence of an authorized signature, address to the vehicle manufacturer.

Signature of Owner

Date 1/18/03

VEHICLE INFORMATION

17 digit vehicle identification number (VIN) located at bottom of driver's side

2FMDA5142WB650509

Make

FORD

Model

WINDSTAR

Model Year

1998

Date Purchased

10/29/99

Dealer's Name and Telephone Number

WANTAGH AUTO SALES 78-1700

Engine

No. Cylinders

6

Fuel Type

GAS

Original Owner

Dealer's City

WANTAGH

State

NY

Zip Code

11793

Transmission Type

AUTO

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Vehicle Component Code

020000 SUSPENSION

Multiple Failure:

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12/3/02

Failure Mileage

70256

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/65R15)

DOT No. (Example: DOTM19ABC036)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:

Date Manufactured:

Model No./Name:

Seat Type:

Installation System:

Child Seat Component Code:

Failed Part:

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(es).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

Number of Deaths

Reported to Police

N

Narrative Description of Incident(s), Crash(es), and Injury(ies).

Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;

i.e., parts repaired or replaced (and if old part is available).

WHILE BRAKING CONSUMER STATED THERE WAS A CLUNKING NOISE IN THE FRONT END. TOOK TO FORD. FORD REPLACED THE SUBFRAME BUSHINGS AND TIE ROD ENDS. PLEASE PROVIDE ANY FURTHER INFORMATION. TS

Tie Rod End Done Under Warranty 50.00 deductible  
Sub Frame Bushing NOT covered

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.

**THE ATTACHMENTS TO THIS  
DOCUMENT HAVE BEEN REMOVED  
TO PROTECT UNWARRANTED  
INVASION OF PERSONAL PRIVACY  
PURSUANT TO EXEMPTION 6 OF  
THE FREEDOM OF INFORMATION  
ACT (FOIA), 5 U.S.C. 552(b)(6).**