



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

FOR AGENCY USE ONLY 231

Date Received

Repository ☐

11 SEP 2003
203 OCT 12 PM 2:48

Reference No.
10038738

Name

Address

City

ATLANTIC BEACH

State

NC

Zip Code

OR

Daytime Telephone Number

E-mail Address

Evening Telephone Number

SAME

Do you authorize NHTSA to contact the manufacturer of your vehicle?

In the absence of a
Signature of Owner

YES ☒ NO ☐

Date 9/30/03

*WALTER GO THIS FORM FOR ME VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on drivers side

2FM2A5141WBG66231

Make

~~CHEVROLET~~
FORD

Model

~~VEHICLE~~ VAN
WINDSTAR

Model Year

1998 OR

Date Purchased

1-22-01

Dealer's Name and Telephone Number

RACEDALE CO 5039 RUEL DANE CITY NC 28537

Engine

4 Cylinders

Fuel Type

Gasoline

Original Owner

Dealer's City

ROYAL AND FORD DETROIT MI

State

CANADA

Zip Code

4M1H7

Transmission Type

AUTO

☒ AntiLock Brakes

Powertrain

OUTSIDE

☒ Cruise Control

Vehicle Component Code

010000 STEERING POWER

Multiple Failure: 1

* NOW OUT OF BUSINESS TAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

9-4-03

Failure Mileage

32952

Failure Speed

2000

SEE FORD INVOICE - HOSE WAS PIPED F18E 3A79H
NOT A HOSE - A STAINLESS STEEL PIPE

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: DOTM123ABC038)

☐ 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(ies).)

Crash

☐ Yes ☒ No

Fire

☐ Yes ☒ No

Number of Persons Injured

NONE

Number of Deaths

NONE

Reported to Police

NO

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)).

CONSUMER STATED WHILE PARKING AND WITHOUT ANY INDICATION VEHICLE LOST POWER STEERING. VEHICLE WAS SERVICED, TECHNICIAN

NOTICED STEERING FITTING WAS RUSTED, "AK IF HAD LOST ALL HYDRAULIC PAND

THIS "HOSE" WAS FAILED AT LOWER END THE FITTING WAS CARBON STEEL

& HAD COMPLETELY ROSTER AWAY. THIS FORD "MISADVENTURE"

SHOULD HAVE BEEN

STAINLESS STEEL LIKE THE "HOSE", IT COST ME \$314.54 SEE Repair

Invoice

If I had been given for this could have caused

me to lose control.

ATTACH 1

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 as a condition of your participation 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 this 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).**