



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 1367

Date Received

Repository ☐

2004 JAN 17 PM 2:31

Reference No.
10055240

OWNER INFORMATION (Type or Print)

Name

Address

City

SPRING CITY

State

PA

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize
in the absence
Signature of Owner

Manufacturer of your vehicle?

Address to the vehicle manufacturer?

Date

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side

1FMDU73E72U

Plate

FORD

Model

EXPLORER

Model Year

2002

Date Purchased

5/2/2002

Dealer's Name and Telephone Number

John Kennedy Ford 610-917-8200

Engine:

No. Cylinders

6

Fuel Type:

gas

Original Owner

☒

Dealer's City

Phoenixville

State

PA

Zip Code

19460

Transmission Type

AUTOMATIC

☒ Antilock Brakes

☒ Cruise Control

Powertrain

4 wheel

ABS

Vehicle Component Code

141000 AIR BAGS:FRONTAL

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12-JAN-2004

Failure Mileage

17000

Failure Speed

35

NO Air Bag Employed

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: DOTM15ABC1234)

☐ Original Equipment

☐ Prior Repair

Failure Location:

Tire Component Code

The Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: Fisher Price

Date Manufactured:

3/2001

Model No./Name:

Back

Seat Type: Infant

Installation System:

Police Owl

Child Seat Component Code:

Failed Part:

Police Owl

APPLICABLE INCIDENT INFORMATION

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

Crash

☒ Yes

Fire

☐ Yes

☐ No

☒ No

Number of Persons Injured

1

Number of Deaths

0

Reported to Police

Y

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 replaced or repaired (and if old part is available).

THE CONSUMER REAR ENDED ANOTHER MOTORIST'S WHILE DRIVING 35 MPH. THIS RESULTED IN SEVERE FRONT END DAMAGE UPON IMPACT. THE INTERIOR PANEL WAS ALSO CRUSHED. NONE OF THE FRONTAL AIR BAGS... LOYED UPON IMPACT. THE CONSUMER SUSTAINED INJURIES TO THE NECK, SHOULDER, BACK, AND KNEE. FBI

NOTE ON THE FRONT END DAMAGE...
The Steering Wheel Column Collapsed on me. Nothing has ever been corrected.

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.

@ 004/07 I, [Signature] Am the owner.
Ruford, John F. Kennedy, the Auto I have

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

I Am Very Concerned for the
Safety of my 2 children
where when I had a diagnostic check
on the truck I was told by Ford,
"When the Battery is disconnected, it
erases everything in it's memory,"
I [redacted] have found that was a Lie!

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Traffic Safety
Administration

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

Official Business
Penalty for Private Use \$200



BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY MAIL, HWY, TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-216
400 7th Street, SW
Washington, DC 20590



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and dial toll free at

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COMPLETE THIS FORM
ON

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE

**VEHICLE
OWNER'S**