



DOT Auto Safety Hotline

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

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 335

Date Received

Repository ☐FEB 26 9:24
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Reference No.

10057749

OWNER INFORMATION (Type or Print)

Name

Address

City

OAKLAND

State

MD

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?

☒ YES☒ NO

In the absence of a signature, please print your name or address to the vehicle manufacturer.

Signature of Owner

Date 2/18/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located on bottom of steering column

1FNUU41L12

Make

FORD

Model

EXCURSION

Model Year

2002

Date Purchased
02-APR-02

Dealer's Name and Telephone Number

Engine:
No. Cylinders

Fuel Type:

GAS
VNL

Original Owner

☒

Dealer's City

State

Zip Code

Transmission Type

AUTOMATIC

☒ Air Brake☐ Cruise Control

Powertrain

Vehicle Component Code

036000 SERVICE BRAKES, HYDRAULIC; ANTILOCK

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

Failure Message

20000

Failure Speed

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/66R16)

DOT No. (Example: DOTM18ABC038)

☐ Original Equipment☐ Tire 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

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 DRIVING VEHICLE JERKED, AND ABS LIGHT ILLUMINATED. ALSO WHEN BRAKING VEHICLE WENT TO THE RIGHT. *AK-

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974, Public Law 93-571, states that 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 responses, or a statistical summary thereof, may be used in support of the agency's action.