



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-DOOT
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100184

Date Received

20-MAY-2004

Repository ☐

2004
Reference No.
10073958

OWNER INFORMATION (Type or Print)

Name

Address

City FAYETTEVILLE

State GA

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 an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 1/1

VEHICLE INFORMATION

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

1FMRU17W2

Make

FORD

Model

EXPEDITION

Model Year

2001

Date Purchased

June 2001

Dealer's Name and Telephone Number

Carolyn Ford

Engine:

No. Cylinders

Fuel Type:

Original Owner

☒

Dealer's City

Fayetteville

State

GA

Zip Code

30214

Transmission Type

☒ Antilock Brakes

Powertrain

☒ Cruise Control

Vehicle Component Code

060000 ENGINE AND ENGINE COOLING

Multiple Failure: 0

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

12-JUN-2001

Failure Mileage

30000

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: DOTM18BANC038)

☐ 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

0

Number of Deaths

0

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).

AT ANY SPEED WHEN VEHICLE IS SITTING ON AN INCLINE ENGINE WILL STALL. ALSO, IF THE VEHICLE HAS LESS THAN HALF TANK OF FUEL IT WOULD STALL. THIS PROBLEM OCCURRED OVER FIVE TIMES, BUT THE DEALER WAS NOT CONSULTED. *AK

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

ATTACH ADDITIONAL SHEETS IF NECESSARY

The Privacy Act of 1974 (Public Law 92-570) 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.