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 1220	
Date Received	Repository ☐
04-MAR-2005	Reference No. 10113425

OWNER INFORMATION (Type or Print)

Name [redacted]		Daytime Telephone Number [redacted]	E-mail Address
Address [redacted]		Evening Telephone Number	
City ROCKFORD	State MI	Zip Code [redacted]	

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 [redacted] Date 9/29/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FMZU74K62U[redacted]	FORD	EXPLORER	2002

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
Original Owner ☒	Dealer's City	State	Zip Code		

Transmission Type			Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	Powertrain	162610 STRUCTURE;BODY;HATCHBACK/LIFTGATE;HINGE AND ATTA Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
01-OCT-2004			

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: DOTMALSABC036)	☐ 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	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

CONSUMER RECEIVED RECALL 04V442000 IN OCTOBER OF 2004 REGARDING THE LIFTGATE. SHE CONTINUED TO CONTACT FORD DEALER AND MANUFACTURER. RECALL REPAIRS HAD NOT BEEN PERFORMED AS OF YET BECAUSE THERE WERE NO PARTS. *AK

9/29/05 Nothing has occured - however — Oct 2004. I received recall 04S20 that glass in liftgate was not safe to open (ok to lift liftgate) Was to have been fixed by Nov 2004. I have called Keller Ford & also Ford & to date nothing. Obviously, Ford is not too concerned about customer safety & I seem to have no recourse.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY