

U.S. Department
of TransportationNational 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

Date Received

 Od_or _____
 rt_dt _____
 od_rt _____
 up_ltr _____

2005 MAY 23 AM 4:33

Reference No.

10122630

Daytime Telephone Number

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OWNER INFORMATION (Type or Print)

Name

Street No.

Apt. No.

City Black Forest State COU

Zip Code

 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

5/5/05

PRODUCT INFORMATION

Vehicle Identification No. (VIN.)
(17 Digits)
1FMYZU73W522(Located at bottom of
windshield on driver's side)Make FordModel ExplorerYear 2002

Purchased Date

October 2001

Dealer's Name

MedVedEngine Size
(GID/CC/L)
☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection
☒ New ☐ Used

Dealer's City

Castle Rock

State

CO

Zip Code

No. Cylinders

4Manufacture Date
(on driver's door or pillar)9/01

Transmission Type

☐ Manual☒ Automatic

Restraint System

☒ Driverside Air Bag☐ Motorbelt☒ Passengerside Air Bag☐ 2-Point Belt☐ 3-Point Belt

Cruise Control

☒ Yes☐ No

Drivetrain

☐ Front☐ Rear☒ 4-Wheel

Vehicle Type

☐ Car☐ Van☐ Minivan☐ Other☒ Sport Utility☐ Truck☐ Motorcycle

Body Style

☐ 2-Door ☒ 4-Door☐ Stationwagon☐ Pick Up Truck☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

The transmission
already had to
be fixed andPart Name(s) The gear shift just fell into
my lap (pt. 2004) as I was backing out
the driveway.

Location

☐ Left☐ Front☐ Right☐ Rear

Failed Part(s)

☒ Original☐ Replacement

Handicap Adaptive Equip

☐ Yes☐ No

TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand

Tire Name

Complete Tire Size

DOT No.

No. of Failures

Date(s) of Failure(s)

Mileage at Failure(s)

Vehicle Speed at Failure(s)

Failed Part(s)
Available?☐ Yes☐ NoNHTSA Previously
Contacted?☐ Yes☐ No

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)

Crash

☐ Yes ☐ No

Fire

☐ Yes ☐ No

Number of Persons Injured

Number of Fatalities

Reported to Manufacturer

☐ Yes ☐ No

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

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

Mail postage free or fax to 202-368-7882