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

2008 MAR 11 PM 12: 29

26-FEB-2008

FOR AGENCY USE ONLY 100148

Date Received	Repository ☐
	Reference No. 10219189

OWNER INFORMATION (Type or Print)

Name	[redacted]		
Address	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
City ELLINGTON	State MO	Zip Code [redacted]	Evening Telephone Number Same

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☒ YES ☐ NO
In the absence of an auth[redacted] or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 3/4/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FMDU34X6[redacted]	FORD	EXPLORER	1991

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
	Blackwell-Baldwin			No: Cylinders 6	Gas
Original Owner ☐	Dealer's City Poplar Bluff	State MO	Zip Code		

Transmission Type		Powertrain	Vehicle Component Code
AUTOMATIC	☒ Antilock Brakes ☒ Cruise Control	4 WHEEL DRIVE	185000 VEHICLE SPEED CONTROL:CRUISE CONTROL Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
16-AUG-2007	100000	0	Automatic Transmission

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
Already replaced by owner		
DOT No. (Example: DOTMAL9ABC036)	☐ 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	0	0	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).

TL*THE CONTACT OWNS A 1991 FORD EXPLORER. THE CONTACT EXPERIENCED AUTOMATIC TRANSMISSION FAILURE. HE TOOK THE VEHICLE TO A MECHANIC AND THEY CLAIMED TO REPAIR IT, BUT ACTUALLY DID NOT. X THE VEHICLE FAILED AND WAS TOWED TO A FORD DEALER AND THEY REPLACED THE CRUISE CONTROL SWITCH. THE AUTOMATIC TRANSMISSION WAS NOT REPAIRED. THE VEHICLE IS CURRENTLY IN THE POSSESSION OF ANOTHER MECHANIC. X THE PURCHASE DATE WAS UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE GREATER THAN 100,000.

* Express Lane in Van Buren, MO.
X Dennis Richards in Ellington, MO
Vehicle actually owned by [redacted]

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

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

Switch failed, fried wires to trans, caused failure of speed control, then complete burnout of Trans [redacted]

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590

Think your vehicle has a safety defect?

If so:

Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline

888-327-4236

www.nhtsa.dot.gov
people saving people
nhtsa

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