

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 100148		
U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 16-JUL-2009		Repository ☐
				Reference No. 10276999		
OWNER INFORMATION (Type or Print)						
Name			Daytime Telephone Number		E-mail Address	
Address			Evening Telephone Number			
City	SAINT CLOUD	State	MN	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 a signature, provide your name or address to the vehicle manufacturer. Signature of Owner: _____ Date: 7/28/09						
VEHICLE INFORMATION						
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 2FMDA50645B			Make FORD	Model FREESTAR	Model Year 2005	
Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders 6	Fuel Type: GAS	
Original Owner ☐	Dealer's City		State	Zip Code		
Transmission Type Automatic	☒ Antilock Brakes ☐ Cruise Control	Powertrain 3.9 6 cyl	Multiple Failure:		Incident Date(s) 10-JUN-2008	
FAILED COMPONENT(S)/PART(S) INFORMATION						
Vehicle Component Code: 200000 WHEELS				Failure Mileage 32000	Failure Speed 0	
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: DOTM19ABC036)		☐ 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).						
TL*THE CONTACT OWNS A 2005 FORD FREESTAR. THE CONTACT HEARD A LOUD PITCHING NOISE COMING FROM THE FRONT END OF THE VEHICLE. HE TOOK THE VEHICLE TO THE DEALER ON FIVE OCCASIONS AND A TECHNICIAN REPLACED THE FRONT AND REAR BRAKING COMPONENTS, BUT THE FAILURE CONTINUED. THE MANUFACTURER STATED THAT HIS MODEL YEAR WAS EXCLUDED FROM NHTSA CAMPAIGN ID NUMBER 04V446000 (WHEELS:CAP/COVER/HUB); THEREFORE, HE WOULD NOT QUALIFY FOR THE FREE REMEDY. THE VEHICLE HAS NOT BEEN REPAIRED. THE FAILURE MILEAGE WAS 32,000 AND CURRENT MILEAGE WAS 42,000.						
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY						
The Privacy Act of 1974-Public Law 93-579 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.						