



U.S. Department
of Transportation
2010 FEB 17 AM 11:55
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 100148

Date Received

13-JAN-2010

Repository ☐

Reference No.
10299622

OWNER INFORMATION (Type or Print)

Name

Address

City

PLEASANT VIEW

State

TN

Zip Code

Daytime Telephone Number

Evening Telephone Number

E-mail Address

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

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

Make
FORD

Model
EXPLORER

Model Year
2002

IFM2U73E92U

Date Purchased

1-21-2002

Dealer's Name and Telephone Number

Hudson Toyota Chrysler

Engine:

No: Cylinders

Fuel Type:

Original Owner

☐

Dealer's City

Madisonville

State

KY

Zip Code

40431

Transmission Type

Auto

☒ Antilock Brakes

☒ Cruise Control

Powertrain

Multiple Failure:

2 Transmissions

Incident Date(s)

6-18-04
12-30-04 + 1-12-2010

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION

Failure Mileage

69,000
157,000

Failure Speed

25

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: DOTM9ABC036)

☐ 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

Number of Deaths

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 2002 FORD EXPLORER. WHILE DRIVING APPROXIMATELY 25 MPH ON NORMAL ROAD CONDITIONS, THE ENGINE RPM'S INCREASED EXCESSIVELY HIGH. THERE WAS A NO POWER RESPONSE WHEN PRESSURE WAS APPLIED TO THE ACCELERATOR PEDAL. THE TRANSMISSION FAILED WITHOUT WARNING. THE VEHICLE WAS TOWED TO AN AUTHORIZED DEALER FOR INSPECTION. THE TRANSMISSION WAS REPLACED. IN ADDITION, ON A SEPARATE OCCASION THE IDENTICAL FAILURES OCCURRED. THE VEHICLE WAS TAKEN TO AN INDEPENDENT MECHANIC WHO STATED THAT THE TRANSMISSION NEEDED TO BE REPLACED. THE VEHICLE IS IN THE PROCESS OF BEING REPAIRED. THE FAILURE MILEAGE WAS UNAVAILABLE. THE CURRENT MILEAGE WAS 155,000. THE VIN WAS UNAVAILABLE.

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.

Jan 25 10:12:13p

Received: Hudson Ford Nissan

Jan 25 2010 01:14PM
2708210962

p.1

Hudson Ford-Nissan

Madisonville, KY 42431
(270) 821-4100

NO	57817	VIN	1FMZU73E92U	DATE IN	06/15/04
YEAR	2002	MAKE	FORD	TIME IN	09:25
MODEL	EXPLORER	COLOR	BLUE	CLOSED	06/18/04
MILES IN	61299	MILES OUT	61299	WRTN	ROGER RH
POST TIME	00/00/00				
MADISONVILLE KY					

(1) CHECK TRANSMISSION NOT SHIFTING INTO 3RD
REMOVE TRANSMISSION AND DISASSEMBLE. REPLACE
SERVOS AND BANDS. REPLACE SEALS AND GASKETS.
REPLACE INTERMEDIATE BAND. REPLACE TRANS.
FILTER. REINSTALL TRANSMISSION, REFILL FLUID
AND ROADTES

Labor	[11] 156	1425.28
4W4E7D021KA	(PST & ROD ASY) 1	19.39
1L2E7153AB	(KIT-TRANS GSK) 1	91.08
1L2E7A098AC	(SCRN ASY-TRAN) 1	25.09
1L2E7D021CA	(PST & ROD ASY) 1	18.50
2L2E7D034AA	(BAND ASY-TRAN) 2	37.42
4L2E7086AA	(GSKT-TRANS M/) 1	13.89
324	(MAXLIFE ATF) 12	47.64
Total Labor		1425.28
Total Parts		253.01
Total Repair (Customer)		1678.29

(11-9179 JASON ELLIS-)

(2) PERFORM 27 POINT INSPECTION-FREE OF CHARGE
ADVISE CUSTOMER

Total Repair (Customer)00

	--C/P--	--W/C--	--INT--	-Total-
Labor Time	156	0	0	156
Total Labor	1425.28	.00	.00	1425.28
Total Parts	253.01	.00	.00	253.01 (N/A)
Total G/O/G	.00	.00	.00	.00
Total Sublet	.00	.00	.00	.00
Total R/O	1678.29	.00	.00	1678.29 (N/A)

Attn: Ashley Brown

W/O	INT	CUSTOMER
.00	.00	Labor 1425.28
.00	.00	Parts 253.01
.00	.00	Sublet .00
.00	.00	Warr Deduct .00
.00	.00	Ss/hazardous 15.00
.00	.00	Oil/Grease .00
.00	.00	Less Disc. .00
.00	.00	Total 1693.29
.00	.00	Tax 16.08
.00	.00	Tax2 .00
.00	.00	Tire Tax .00
.00	.00	TOTAL (CASH) 1709.37

Phone 382-5393

N U M B E R

DATE 1-19-2010

157201

CITY

PHONE

WHEN PROMISED

WRITTEN BY

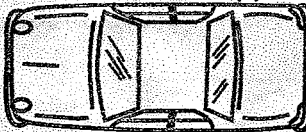
MOTOR NO.

QTY	PART NO.	NAME OF PART	SALE AMOUNT	DESCRIPTION OF WORK	AMOUNT
LABOR NOT WARRANTIED ON CARRY-OUT TRANSMISSION. WARRANTY 12 MONTHS OR 12000 MILES WHICH EVER COMES FIRST AT TRANSMISSION EXCHANGE.				RTR Labor Rebuilt 4R55E Transmission Exchange Torque Converter Fluid	1650.00
		CK# [REDACTED]	1591.38		
		1-19-10			
		CK# [REDACTED]	219.50		
		1-19-10			
TOTAL ADDITIONAL PARTS FROM BACK				PARTS	
TOTAL PARTS				LABOR	
				SUBTOTAL	
ESTIMATES ARE FOR LABOR ONLY, MATERIAL ADDITIONAL				TAX	160.88
I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE ALONG WITH NECESSARY MATERIALS. YOU AND YOUR EMPLOYEES MAY OPERATE ABOVE VEHICLE FOR THE PURPOSE OF TESTING, INSPECTION OR DELIVERY AT MY RISK. AN EXPRESS MECHANIC'S LIEN IS ACKNOWLEDGED ON ABOVE VEHICLE TO SECURE THE AMOUNT OF REPAIRS THERETO. It is understood that this company assumes no responsibility for loss or damage by theft or fire to vehicles placed with them for storage, sale, repair or while road testing.				TOTAL	1810.88

*AUTHORIZED BY:

TOWING
 CEDAR HILL, TN 37032
 615-896-2600
 831-906-9333
 388 TOWS ALL 888-869-7253

ROAD SERVICE

TIME OF CALL A.M. P.M.	DATE IN	DATE OUT	TIME START A.M. P.M.	TIME FINISH A.M. P.M.	REQUESTED BY	PO/CASE #	OFFICER NAME																																										
NAME					PHONE #																																												
ADDRESS																																																	
CITY					STATE	ZIP																																											
YEAR	MAKE/MODEL		COLOR	ODOMETER	DRIVER																																												
MARKER PLATE #	STATE	VIN #	REGISTERED OWNER																																														
LOCATION OF VEHICLE																																																	
TOWED TO																																																	
INSPECTED BY INSURANCE CO.			APPRAISER NAME		DATE	DRIVER																																											
RELEASED BY			DATE	PHONE #																																													
REASON FOR TOW ☐ ACCIDENT ☒ BREAK DOWN ☐ ABANDONED ☐ UNREGISTERED ☐ NO START ☐ OUT OF GAS ☐ FLAT TIRE ☐ FIRE LANE ☐ LOCK OUT ☐ NO TRESPASS ☐ TOW ZONE ☐ ARREST ☐ STOLEN ☐ IMPOUNDED ☐ SNOW REMOVAL			TYPE OF TOW ☐ SLING/HOIST ☒ FLAT BED/RAMP ☐ WHEEL LIFT ☐ _____ TOWED PER ORDER OF ☐ STATE POLICE ☐ LOCAL POLICE ☒ OWNER OF A CAR ☐ DEALER		PERSONAL'S TAKEN BY DATE PHONE# VEHICLE STORAGE TIME FROM TO DAYS @ \$ INDICATE DAMAGED AREA(S) ON VEHICLE:  KEYS LEFT (Y) (N) RADIO (Y) (N)																																												
SPECIAL EQUIPMENT USED ☐ WINCH ☐ FLARES ☐ DOLLIES ☐ SCOTCH BLOCKS ☐ RAMPS ☐ ☐ SNATCH BLOCKS ☐			OTHER SERVICES ☐ SWEEP ☐ FIRST AID ☐ REMOVE AXLE ☐ SECURE LOOSE PARTS		<table border="1"> <tr> <td rowspan="2">MILEAGE</td> <td>FINISH</td> <td>TOWING CHARGE</td> <td></td> <td></td> </tr> <tr> <td>START</td> <td>MILEAGE</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">LABOR TIME</td> <td>TOTAL</td> <td>LABOR</td> <td></td> <td></td> </tr> <tr> <td>FINISH</td> <td>EXTRA PERSON</td> <td></td> <td></td> </tr> <tr> <td rowspan="2">EXTRA PERSON</td> <td>START</td> <td>SPECIAL EQUIPMENT</td> <td></td> <td></td> </tr> <tr> <td>TOTAL</td> <td>STORAGE</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>SUBTOTAL</td> <td></td> <td></td> </tr> <tr> <td colspan="2"></td> <td>TAX</td> <td>225</td> <td></td> </tr> <tr> <td colspan="2"></td> <td>TOTAL</td> <td>7125</td> <td></td> </tr> </table>			MILEAGE	FINISH	TOWING CHARGE			START	MILEAGE			LABOR TIME	TOTAL	LABOR			FINISH	EXTRA PERSON			EXTRA PERSON	START	SPECIAL EQUIPMENT			TOTAL	STORAGE					SUBTOTAL					TAX	225				TOTAL	7125	
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		SUBTOTAL																																															
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		TOTAL	7125																																														
METHOD OF PAYMENT ☐ CASH ☐ CHECK DRIVER'S LIC. ☐ CREDIT CARD # ☒ VISA ☐ EXP. DATE 12/1			AUTHORIZED SIGNATURE DATE DRIVER SIGNATURE DATE																																														

We cannot be responsible for damages caused by faulty tires, bumper brackets, etc. This company assumes no responsibility for loss or damage by theft, fire or any other cause beyond our control, to any vehicle placed with them for storage or repair.

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THANK YOU!
 PRODUCT 6760

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