


INFORMATION Redacted PURSUANT TO THE FREEDOM OF

INFORMATION ACT (FOIA), 5 U.S.C. 552(B)(6)

 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 100148	Date Received SEP 14 2010 13-APR-2010	Repository <input type="checkbox"/> Reference No. 10325458
	OWNER INFORMATION (Type or Print)		Daytime Telephone Number [REDACTED]	E-mail Address [REDACTED]
Name [REDACTED]		Address [REDACTED]		Evening Telephone Number [REDACTED]
City GOFFSTOWN	State NH	Zip Code [REDACTED]		
<i>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).</i>				
VEHICLE INFORMATION				
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1FMZU73EX5L [REDACTED]		Make FORD	Model EXPLORER	Model Year 2005
Date Purchased	Dealer's Name and Telephone Number		Engine: No: Cylinders	Fuel Type:
Original Owner <input type="checkbox"/>	Dealer's City	State	Zip Code	
Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure:		Incident Date(s) 13-APR-2010
FAILED COMPONENT(S)/PART(S) INFORMATION				
Vehicle Component Code: 020000 SUSPENSION			Failure Mileage 59000	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: DOTMAL9ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i>				
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 2005 FORD EXPLORER. THE CONTACT STATED WHEN HE TOOK HIS VEHICLE INTO A LOCAL REPAIR SHOP FOR ROUTINE MAINTENANCE, THE MECHANIC INFORMED HIM THAT THE REAR COIL SPRING WAS CRACKING; IT WAS ENCASED WITH PLASTIC AND WATER GOT INTO IT. THE VEHICLE HAD NOT BEEN REPAIRED AT THE TIME OF THE COMPLAINT. THE CURRENT AND FAILURE MILEAGES WERE APPROXIMATELY 59,000.				
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 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.				

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

MELANIE ADVISED THIS IS NOT THE FIRST EXPOSURE WITH THIS PROBLEM! AM LUCKY I DID NOT HAVE AN ALLIANCE YRS IT WAS FIXED AS SOON AS I HAD THE MONIES COPY OF BILL ATTACHED. NBRD BETTER WAY TO STOP WATER FROM COLLECTING IN PLASTIC SO IT WOULDN'T RUST A CRACK HOW MANY EXPOSURES HAS THIS HAPPENED TO

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

1200 New Jersey Avenue SE, Washington, D.C. 20077-9382

Official Business Penalty for Private Use \$300



MANCHESTER NH 031

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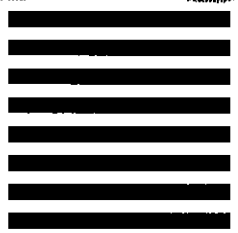


NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 1888 WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382



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



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration

GRANITE STATE TIRE & BATTERY

945 HANOVER ST

MANCHESTER, NH 03104



Invoice

Date

Invoice #

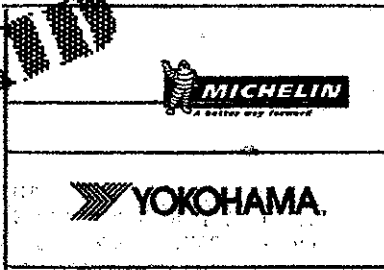
8/23/2010

41272

Bill To



GOFFSTOWN, NH



Project	YEAR	MAKE	MODEL	PLATE	STATE	MILEAGE
2005 FORD	2005	FORD	EXPLORER	[REDACTED]	NH	58066

Quantity	Description	Rate	Amount
1	NH STATE INSPECTION	45.00	45.00
1	LUBE OIL AND FILTER-CHECK & TOP OFF ALL FLUIDS-SET TIRE PRESSURES-CK BELTS & HOSES	45.50	45.50
1	RIGHT REAR COIL SPRING	129.10	129.10
1	LABOR TO R/R CRACKED SPRING	180.00	180.00
1	FRONT DIFFERENTIAL PINION SEAL	20.58	20.58
1	LABOR TO R/R PINION SEAL	110.00	110.00
1	CAN GET HEAT AND COLD AIR--DOOR BROKEN IN CENTER OF HEATER BOX--WILL HAVE TO REMOVE HEATER BOX TO FIX	0.00	0.00
1	MIRROR COST INSTALLED 150--RIGHT SIDE STEP COST INSTALLED 500--WE HAVE CALLS IN FOR USED PARTS	0.00	0.00

Total \$530.18

Phone #

Fax #

E-mail

Web Site

(603) 623-9666

(603) 623-1766

GSTIRE@AOL.COM

GRANITESTATETIRE.COM