



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
FEB 22 2011
 09-DEC-2010

Repository
 Reference No.
 10369785

OWNER INFORMATION (Type or Print)

Name [REDACTED]
 Address [REDACTED]
 City **CHAPEL HILL** State **TN** Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]
 Evening Telephone Number [REDACTED]

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
1FMZU63K94U [REDACTED] Make **FORD Truck** Model **EXPLORER** Model Year **2004**
 Date Purchased [REDACTED] Dealer's Name and Telephone Number **Milner CR 816 360 3251** Engine: [REDACTED] Fuel Type: [REDACTED]
 Original Owner Dealer's City **Harrisonville** State **Mo.** Zip Code [REDACTED]
 Transmission Type **A** Antilock Brakes Powertrain **?** Multiple Failure: **3 Times** Incident Date(s) **01-AUG-2010** *Plus this date + minus*
 Cruise Control

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING
Engine turn it's self off Failure Mileage **67100** Failure Speed **- 55 +**

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]
 DOT No. (Example: DOTM9ABC036) Original Equipment Prior Repair Failure Location: [REDACTED]
 Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]
 Seat Type: [REDACTED] Installation System: [REDACTED]
 Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

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 2004 FORD EXPLORER XLT(NA). THE CONTACT STATED THAT WHILE DRIVING APPROXIMATELY 55 MPH, THE VEHICLE SUDDENLY STALLED AND ALL THE WARNING LIGHTS ILLUMINATED ON THE INSTRUMENT PANEL. THE VEHICLE WAS ABLE TO BE RESTARTED. THE FAILURE OCCURRED INTERMITTENTLY. THE VEHICLE WAS INSPECTED BY AN AUTHORIZED DEALER WHO COULD NOT DUPLICATE THE FAILURE. THE VEHICLE HAD NOT BEEN REPAIRED. THE FAILURE MILEAGE WAS APPROXIMATELY 67,100.

it stop

3 Times different Dates

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.

323278



1129 Murfreesboro Rd. Franklin, TN 37064 Phone (615) 794-4585 Fax (615) 790-4622 www.alexanderfm.com



STATE REG# 3



0101J323278

RECOMMENDED SERVICES

Table with 4 columns: OPERATION, OPERATION DESCRIPTION, MO / MI, TOTAL. Lists services like GREEN Tire Tread, GREEN Brake Lining, YELLOW Tire Tread, RED Battery Charge, RED Tire Tread, RED Brake Lining, Replace Fuel Filter, GREEN Tire Tread, GREEN Brake Lining, YELLOW Tire Tread.

DISCLAIMER OF WARRANTIES

THE ONLY WARRANTIES APPLYING TO THIS PART(S) ARE THOSE WHICH MAY BE OFFERED BY THE MANUFACTURER. THE SELLING DEALER HEREBY EXPRESSLY DISCLAIMS ALL WARRANTIES EITHER EXPRESS OR IMPLIED...

TERMS: STRICTLY CASH UNLESS ARRANGEMENTS MADE

I hereby authorize the repair work hereinafter set forth to be done along with the necessary material and agree that you are not responsible for loss or damage to vehicle or articles left in vehicle in case of fire, theft, or any other cause beyond your control...

CUSTOMER'S AUTHORIZED SIGNATURE

SERVICE HISTORY

CELL:

Table with columns: DATE, REPAIR ORDER, MILEAGE, ADVISOR, TECHNICIAN, TYPE, OPERATION, OPERATION DESCRIPTION. Shows service history for 02/04/10 and 10/20/09.

S E R V I C E SALESPERSON NO. 77707 RHONDEL JAMES GOLDEN

Vehicle information form including VEHICLE ID NO. (1FMZU63K94U), YEAR / MAKE / MODEL (04/FORD TRUCK/EXPLORER/4DR 2WD XLT), STOCK NO. (6406), LICENSE NO. (323278), and other details.

Service details form including RESIDENCE PHONE, BUSINESS PHONE, APPOINTMENT, TERMS (CASH, CREDIT CARD, CHECK, OTHER), and LABOR INSTRUCTIONS.

LABOR INSTRUCTIONS

ORIGINAL CUSTOMER ESTIMATE: TOTAL X C 06FOZ01 Gas Eng Drivblty II CUSTOMER STATES VEHICLE SHUTS OFF WHEN DRIVING DOWN THE ROAD HAPPENED 3 TIMES NOW. LAST WAS 3 WEEKS AGO. SEEMS TO DRIVE NORMAL, SHIFT NORMAL TO OWNER. EACH TIME VEHICLE WAS WARM. DRIVING VEHICLE FOR A GOOD WHILE HAPPENED DURING THE DAY EACH TIME.

1 00FOZ99P MULTI-POINT INSP. # PERFORM MULTI-POINT INSPECTION

Confirmation # 081 # 10369785

mass air flow works electronically when you push on accel. pedal it sends signal to mass air flow then to computer to give the vehicle fuel. cause vehicle to shut down.

NOT RESPONSIBLE FOR LOSS OR DAMAGE TO CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT, OR ANY CAUSE BEYOND OUR CONTROL.

Table for PRELIMINARY ESTIMATE \$, AUTHORIZED BY X, and REVISIONS.

I HEREBY ACKNOWLEDGE THAT I WAS NOTIFIED & GAVE ORAL APPROVAL OF THE ABOVE REVISED ESTIMATES.

CUSTOMER SIGNATURE

In the event that you, the customer, authorize commencement but do not authorize completion of a repair or service, a charge will be imposed for disassembly, reassembly or partially completed work.

The Reynolds and Reynolds Company, FRANKFORD, IL 60139