

 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 MAY 23 2011 24-MAR-2011	
OWNER INFORMATION (Type or Print)					
Name			Daytime Telephone Number		E-mail Address
Address					
City	State	Zip Code	Evening Telephone Number		
KEWANEE	IL		SAME		
<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			Make	Model	Model Year
2FMZA51605B			FORD	FREESTAR	2005
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
July 06	GUSTAFSON FORD 309-932-3710		No: Cylinders	GASOLINE	
Original Owner ☐	Dealer's City	State	Zip Code		
	KEWANEE IL	IL	61443		
Transmission Type	☒ Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
AOD	☒ Cruise Control	TRANSMISSION	TORQUE CONVERTER	11-MAR-2011	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 060000 ENGINE AND ENGINE COOLING, 180000 VEHICLE SPEED CONTROL, 103700 POWER TRAIN: AUTOMATIC TRANSMISSION: TORQUE CONVERTER				Failure Mileage	Failure Speed
				146000	45
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	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 2005 FORD FREESTAR. THE CONTACT STATED THAT WHILE DRIVING APPROXIMATELY 45 MPH, THE VEHICLE SUDDENLY LOST POWER ABNORMALLY WITH AN INCREASE IN ENGINE RPM'S. THE VEHICLE WAS THEN TOWED TO AN INDEPENDENT MECHANIC WHERE HE WAS ADVISED THAT THE TORQUE CONVERTER, SHAFT, AND A PUMP WOULD NEED REPLACING. THE VEHICLE WAS REPAIRED FOR ALL COMPONENTS. THE FAILURE AND CURRENT MILEAGE WAS APPROXIMATELY 146,000.					
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.					