

INFORMATION Redacted PURSUANT TO THE FREEDOM OF
INFORMATION ACT (FOIA), 5 U.S.C . 552(B)(6)

From: [Wells, Cynthia CTR \(NHTSA\)](#)
To: [Fogle, Brenda CTR \(NHTSA\)](#)
Subject: FW: Follow up to ODI Complaint: 10455649
Date: Thursday, May 17, 2012 3:02:47 PM EQ-10455649-5594
Attachments: [NTB .pdf](#)
[EVOQ_EMAIL_RESPONSE.doc](#)
[10455649.pdf](#)

From: Williams, Maritza CTR (NHTSA) **On Behalf Of** DataQuality, DataQuality (NHTSA)
Sent: Thursday, May 17, 2012 3:02 PM
To: Wells, Cynthia CTR (NHTSA)
Subject: FW: Follow up to ODI Complaint: 10455649

From: [REDACTED]
Sent: Thursday, May 17, 2012 2:59 PM
To: DataQuality, DataQuality (NHTSA)
Subject: Follow up to ODI Complaint: 10455649


Corrected copy attached per your instructions.

Begin forwarded message:

From: <EVOQ@dot.gov>
Subject: FW: NHTSA: Follow up to ODI Complaint: 10455649
Date: May 1, 2012 9:15:18 AM EDT
To: [REDACTED]

Please see the attached copy of your recent complaint and instructions. Please make any necessary edits and return via email to dataquality@dot.gov or fax to (202) 366-1767. Due to the volume of complaints we receive and our limited resources, we cannot respond to every complaint.

NHTSA/Office of Defects Investigation

 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 18-APR-2012		Repository <input type="checkbox"/> Reference No. 10455649	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	Zip Code			
ROSWELL	GA				
<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	
		FORD	EXPLORER	2005	
Date Purchased	Dealer's Name and Telephone Number		Engine:	Fuel Type:	
			No: Cylinders		
Original Owner	Dealer's City	State	Zip Code		
<input type="checkbox"/>					
Transmission Type	<input type="checkbox"/> Antilock Brakes	Powertrain	Multiple Failure:	Incident Date(s)	
	<input type="checkbox"/> Cruise Control			01-AUG-2011	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Vehicle Component Codes: 190000 TIRES, 191000 TIRES: TREAD/BELT			Failure Mileage	Failure Speed	
			68874	55	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
B.F.GOODRICH	TOURING T/A		235/75R16		
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment	Failure Location: DRIVER SIDE FRONT All 4 tires (92)			
AP70L2113710	<input type="checkbox"/> Prior Repair				
Tire Component Code	Tire Failure Type: TREAD SEPARATION				
191000 TIRES:TREAD/BELT					
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	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			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, EQUIPPED WITH GOODRICH TOURING T/A TIRES. THE TIRE SIZE WAS P235/75/R16 AND THE DOT NUMBER WAS AP70L2113710. THE CONTACT STATED THAT THERE WAS EXTREME AND CONSISTENT TREAD WEAR ON THE TIRES. DURING INCLEMENT WEATHER, THE VEHICLE WOULD HYDROPLANE ON THE HIGHWAY. THE DEALER AND MANUFACTURER WERE NOTIFIED, BUT STATED THAT THERE WAS NOTHING THAT THEY WERE ABLE TO DO TO ASSIST. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 58,575 AND THE CURRENT MILEAGE WAS 68,874. 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 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.					



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

18-APR-2012

Repository Reference No.
10455649**OWNER INFORMATION (Type or Print)**

Name [REDACTED]

Address [REDACTED]

City ROSWELL

State GA

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

Make
FORDModel
EXPLORERModel Year
2005

Date Purchased

Dealer's Name and Telephone Number

Engine:
No: Cylinders

Fuel Type:

Original Owner

Dealer's City

State

Zip Code

Transmission Type

 Antilock Brakes

Powertrain

Multiple Failure:

Incident Date(s)

01-AUG-2011

 Cruise Control**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Codes: 190000 TIRES, 191000 TIRES: TREAD/BELT

Failure Mileage
68874Failure Speed
55**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**Tire Make
B.F. GOODRICHTire Model (Name or Number)
TOURING T/ATire Size (Example P215/65R15)
235/75R16DOT No. (Example: DOTM19ABC036)
AP70L2113710 Original Equipment
 Prior Repair

Failure Location: DRIVER SIDE FRONT

Tire Component Code
191000 TIRES:TREAD/BELT

Tire Failure Type: TREAD SEPARATION

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).

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Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

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U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

1200 New Jersey Avenue SE
Washington, DC 20590

Dear Consumer:

NVS-216rr

As a follow-up to your report to the Vehicle Safety Hotline (VSH), we have recorded your information on the enclosed Vehicle Owner's Questionnaire (VOQ) form. Please review the form and make changes, additions and corrections as necessary. Additionally, please provide a more detailed description of the failures(s) you reported that you believe relevant to safety. Also, if available, include copies of repair invoices, letters to the manufacturer, or any other document related to the problem(s) you reported. If a crash or fire occurred, include a copy of the police or fire department report.

It is helpful to be as thorough as possible in your report so that our ability to use your report will be maximized. If you do not have the information, it is not necessary to complete all the boxes. However, it is very difficult to identify the scope of a vehicle problem unless the vehicle identification number (VIN) is known. The VIN is located inside the vehicle on the dashboard adjacent to the left (driver's side) of the windshield pillar and on the drivers' door or the driver's door jam. It may also be listed on a dealer repair invoice or your insurance or registration cards. When reporting a tire problem, the brand name, tire line and complete tire size should be included. Be certain to provide the DOT tire identification number. It is usually located near the rim flange of the tire on either side of the tire.

We do not make your personal information (name, address, phone numbers, etc.) available to the general public. However, if we open an investigation that involves your vehicle, we will provide the manufacturer of your vehicle with a complete copy of your report. The information you provide may assist the manufacturer and NHTSA in determining if a safety-related defect exists.

Any information provided is entirely voluntary. There is no consequence or penalty of any kind if you do not wish to provide it. We seek this information to develop both statistical and investigative evidence that will help identify potential safety related problems in vehicles or vehicle equipment, e.g., tires, child safety seats, jacks, etc.

When completed, please fold and staple or tape the form so that the pre-addressed portion of the form is on the outside. If a larger envelope is used, tape the VOQ form to the larger envelope so that the pre-addressed portion of the form is showing.

If further assistance is needed, please contact the VSH at their toll-free number, 1-888-327-4236.

Thank you for your cooperation.

Sincerely,

Randy Reid Chief
Correspondence Research Division
Office of Defects Investigation
Enforcement

Enclosure: VOQ

