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	Repository ☐
23-APR-2012 JUN 04 2012	Reference No. 10456100

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number [redacted]	E-mail Address
Address	[redacted]	Evening Telephone Number	
City OAK FOREST	State IL	Zip Code [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	Model	Model Year
1FMZU73K84[redacted]	FORD	EXPLORER	2003

Date Purchased	Dealer's Name and Telephone Number			Engine:	Fuel Type:
09/2003	JOE RIZZA FORD 708-403-0300			No: Cylinders 6	
Original Owner ☐	Dealer's City ORLAND PARK	State IL	Zip Code 60462		

Transmission Type	☒ Antilock Brakes ☒ Cruise Control	Powertrain	Multiple Failure:	Incident Date(s) 15-MAR-2012

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Codes: 162000 STRUCTURE: BODY, 130000 VISIBILITY	Failure Mileage 118000	Failure Speed

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)	☐ 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 Ø	Number of Deaths Ø	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 2003 FORD EXPLORER. THE CONTACT STATED THAT THERE WAS A LOUD SQUEAKING COMING FROM THE REAR WINDOW. THE CONTACT NOTICED THAT THE DRIVER SIDE OF THE REAR WINDSHIELD HINGE WAS CROOKED AND ~~THE PANEL~~ WAS FRACTURED. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER WHERE THEY ADVISED THAT THE HINGES NEED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE VIN WAS NOT AVAILABLE. THE FAILURE MILEAGE WAS 118,000 AND THE CURRENT MILEAGE WAS 121,000.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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

THE VEHICLE FAILURE WAS PRETTY ACCURATE ON THE DESCRIPTION OF THE REVERSE SIDE. I D.D MAKE AN ADJUSTENT (THE HINGE WAS FRACTURED NOT THE PANEL). I WANTED TO ADD THAT THE BACK WINDOW HAD SHIFTED TO THE RIGHT SIDE AND WAS RESTING ON THE BACK LIFT HOUSING CAUSING IT TO SQUEAK. I WAS ADVISED BY SERVICE MANAGER NOT TO OPEN UNTIL REPAIRED. THE VEHICLE WAS REPAIRED AND I HAVE ATTACHED THE INVOICE. THE SHOP HAD HINGES IN STOCK BECAUSE THEY SAID THAT THEY SEE MANY VEHICLES WITH SAME SITUATION

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

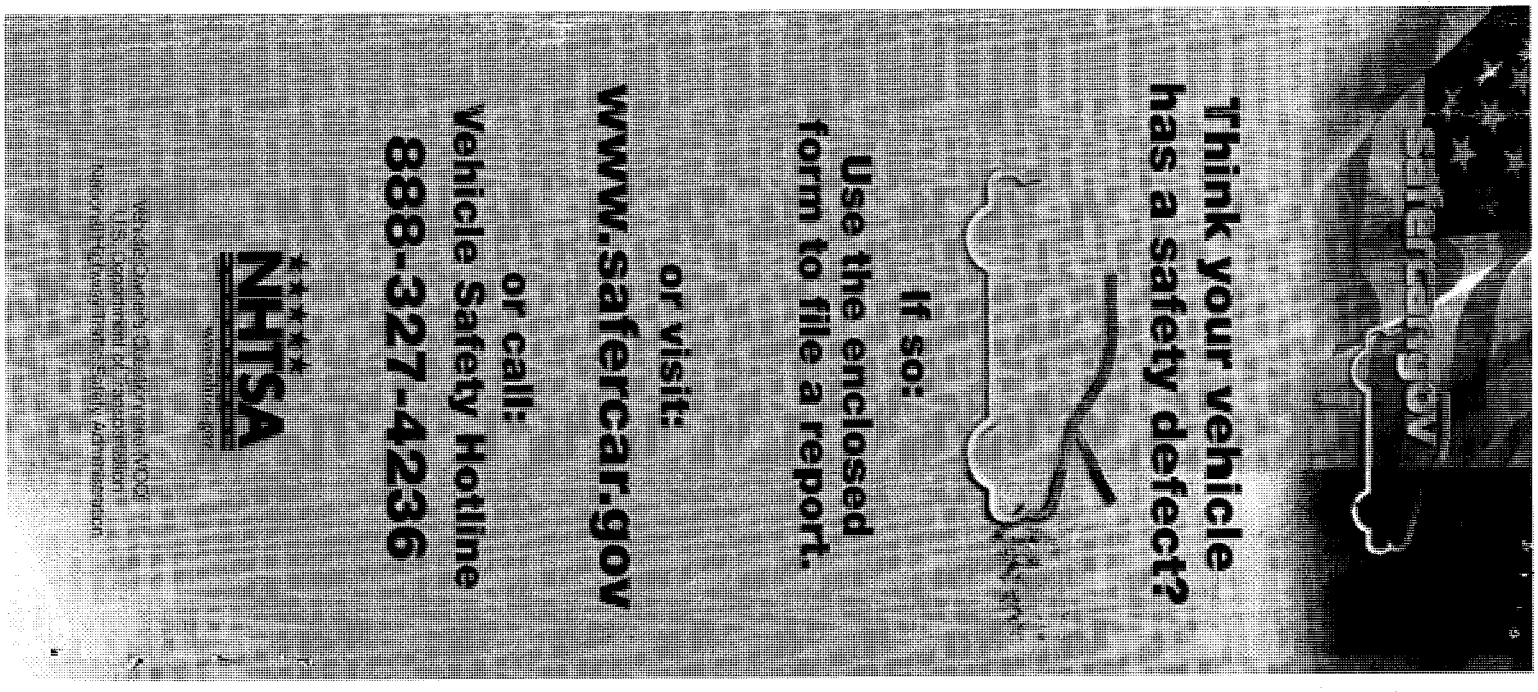
S SUBURBAN BLVD
24 MAY 2002 PM 5 L

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



[redacted]
OAK FOREST, IL [redacted]
HOME: [redacted] CONT: [redacted]
BUS: CELL:

DUPLICATE 2
PAGE 1

SERVICE ADVISOR: 2167 RON WOOD

8100 West 159th Street
Orland Park, Illinois 60462
Phone (708) 403-0300

COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/ OUT	TAG
WHITE	03	FORD EXPLORER	1FMZU73K83U[redacted]	[redacted]	123814/123814	T5157

DEL DATE	PROD. DATE	WARR. EXP.	PROMISED	PO NO.	RATE	PAYMENT	INV. DATE
20SEP03 DD			13:00 24APR12		0.00	RR	24APR12

R.O. OPENED	READY	OPTIONS:
07:46 24APR12	12:59 24APR12	STK:NDL604 DLR:01526 1)OAR# 170 265 620

LINE OPCODE TECH TYPE HOURS			LIST	NET	TOTAL
A REPLACE REAR GLASS HINGES					
EED REPLACED REAR GLASS HINGES					
	6	C		79.95	79.95
1 2L2Z*78420A68*AA KIT - REAR WINDOW REPAIR			79.94	79.94	79.94
PARTS: 79.94 LABOR: 79.95 OTHER: 0.00 TOTAL LINE A:					159.89
					+ TAX
**********					
B "THE WORKS" FUEL SAVER PACKAGE. MOTORCRAFT PREMIUM SYNTHETIC BLEND OIL & MOTORCRAFT FILTER CHANGE. ROTATE TIRES & INSPECT BRAKES. TEST BATTERY, CHECK FILTERS, HOSES & BELTS. TOP OFF FLUIDS.					
WRKS "THE WORKS" FUEL SAVER PACKAGE. MOTORCRAFT PREMIUM SYNTHETIC BLEND OIL & MOTORCRAFT FILTER CHANGE. ROTATE TIRES & INSPECT BRAKES. TEST BATTERY, CHECK FILTERS, HOSES & BELTS, TOP OFF FLUIDS.					
	6	C		15.45	15.45
1 FL*820*S FILTER ASY - OIL			7.69	5.00	5.00
1 5W20-6 OIL			19.50	19.50	19.50
PARTS: 24.50 LABOR: 15.45 OTHER: 0.00 TOTAL LINE B:					39.95
**********					
C *COMPLIMENTARY MULTIPOINT VEHICLE INSPECTION ($49.95 VALUE)					
99P *COMPLIMENTARY MULTIPOINT VEHICLE INSPECTION ($49.95 VALUE)					
	6	C		0.00	0.00
GBK >>>GREEN BRAKES. MEASURED OVER 5mm AT THIS TIME					
	6	C		0.00	0.00
PARTS: 0.00 LABOR: 0.00 OTHER: 0.00 TOTAL LINE C:					0.00
**********					
D >>>GREEN TIRES. MEASURED OVER 7/32 AT THIS TIME					
GTIRE >>>GREEN TIRES. MEASURED OVER 7/32 AT THIS TIME					

ON BEHALF OF SERVICING DEALER, I HEREBY CE
INFORMATION CONTAINED HEREON IS ACCURATE UN
SHOWN. SERVICES DESCRIBED WERE PERFORMED A
OWNER. THERE WAS NO INDICATION FROM THE APP
VEHICLE OR OTHERWISE, THAT ANY PART REPAIRE
UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY
ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS S
CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DA
NOTIFICATION AT THE SERVICING DEALER FOR
MANUFACTURER'S REPRESENTATIVE.

(SIGNED) DEALER, GENERAL MANAGER OR AUTHORIZED PE

JOE RIZZA FORD PORSC
8100 W 159TH ST
ORLAND PARK, IL 6046
KIA

BATCH# 016
S-A-L-E-S D-A-F-T
71963747
000000023042

REF# 0008
CD TYPE# VISA
TR TYPE# PURCHASE
DATE# APR 24, 12 13:18:05

TOTAL $200.02

ACCT# [redacted] EXP# 04/14
AP# 09[redacted]
NAME#

CARDMEMBER ACKNOWLEDGES RECEIPT OF GOODS AND/OR SERVICES IN THE AMOUNT OF THE TOTAL SHOWN HEREON AND AGREES TO PERFORM THE OBLIGATIONS SET FORTH BY THE CARDMEMBER'S AGREEMENT WITH THE ISSUER

HAVE A NICE DAY!

CUSTOMER COPY

TOTALS