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 21 2012
10-AUG-2012

Repository ☐

Reference No. 10470168

OWNER INFORMATION (Type or Print)

Name [redacted]
Address [redacted]
City FRANKLIN | State IN | Zip Code [redacted]

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

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
2FMDA51U0VB[redacted]	FORD	WINDSTAR	1997

Date Purchased	Dealer's Name and Telephone Number			Engine: No: Cylinders	Fuel Type:
Original Owner ☐	Dealer's City: Franklin	State: IN	Zip Code: 46131		Gas

Transmission Type			Powertrain	Multiple Failure:	Incident Date(s)
Auto	☒ Antilock Brakes	☒ Cruise Control			10-AUG-2012

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 020000 SUSPENSION	Failure Mileage	Failure Speed
Track bar bracket Weld broke & dropped passenger side of bar to the highway	90000	40

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	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 1997 FORD WINDSTAR. THE CONTACT STATED THAT WHILE DRIVING 40 MPH, THE TRACK BAR DETACHED FROM THE VEHICLE. THE CONTACT STATED THAT THE VEHICLE BEGAN TO WOBBLE EXCESSIVELY. THE VEHICLE WAS NOT TAKEN TO THE DEALER OR A MECHANIC FOR INSPECTION. THE MANUFACTURER WAS NOTIFIED OF THE ISSUE AND ADVISED THE CONTACT NOT TO DRIVE THE VEHICLE. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 90,000. The car was taken to the local Ford dealer (towed). It was not repaired there due to excessive cost. It was repaired at owners expense at R+H Mechanics in Franklin, IN.

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