Form Approved: OMB No. 2127-0042

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

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: http://www.nhtsa.dot.gov

FOR AGENCY USE ONLY 258

Date Received: 12-JAN-2002

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 756741

[redacted]

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ *YES* ☐ *NO*
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ **Date**____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Location of number and check digit)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
2FMDA51U8WBA06659	FORD TRUCK	WINDSTAR	1998	

Purchase Dat: 01-JUL-1997 ☒ New ☐ Used

Dealer's Name _____

City _____ State _____ Zip Code _____

Engine Size (CID/CC/L 3.0
No Cylinders _____

☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	☐ Yes ☒ No	☒ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	☐ 2-Door ☐ 4-Door ☒ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
03250000 03272000	BRAKES:HYDRAULIC:ANTI-SKID SYSTEM BRAKES:HYDRAULIC:DISC:PADS AND SHOES	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
3	01-DEC-2001	☐ Yes ☐ No	☐ Yes ☐ No
	Mileage at Failure(s) 84000		
	Vehicle Speed at Failure(s) 1		

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☐ No	☐ Yes ☒ No	0	0		☐ Yes ☒ No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

I HAVE COMPLAINED ABOUT THESE 2 CONDITIONS SINCE DAY ONE. NOW THAT MY WARRANTY HAS RUN OUT, AND I'M NOT WORKING, THEY TELL ME I WOULD HAVE TO PAY. MY ABS SYSTEM IS TEARING AWAY AT MY BRAKE PADS. THE VEHICAL GRINDS TO A STOP. TO ME, THIS IS A SAFTY ISSUE, AS I HAVE A 13 MONTH OLD SON. I WOULD HATE TO APPLY MY BRAKES, AND THEY ARE NOT THERE. MY ABS LIGHT IS ON.....ALL THE TIME. I AM ON DISABILITY, AND HAVE GONE TO THE DEALER REGARDING THIS ISSUE. AS FAR AS THE REAR WIPERM, IT GOES ON WHEN I PUT THE VAN IN REVERSE.....WEATHER OR NOT THE FRONT WIPERS ARE ON.. OR NOT. *AK

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