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** 798

Date Received: 15-APR-2002

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

Reference No.: 8007553

[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.) (Locate at bottom of windshield on driver's side) | Vehicle Make | Vehicle Model | Vehicle Year | Current Odometer Readin |
|---|---|---|---|---|
| N/A | FORD TRUCK | EXPEDITION | 1997 | |

| Purchase Dat | | Engine Size | |
|---|---|---|---|
| ☒ New ☐ Used | Dealer's Name_____ City_____ State_____ Zip Code_____ | (CID/CC/L ____ 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 Ult ☐ 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 |
|---|---|---|---|
| 01560000 | STEERING:LINKAGES:TIE ROD:END | ☐ Left ☐ Right ☐ Front ☐ Rear | ☐ Original ☐ Replacement |

| No of Failure | Dates of Failure(s) | Failed Part(s) | NHTSA Previously |
|---|---|---|---|
| | 01-FEB-2002 | ☐ Yes ☐ No | ☐ Yes ☐ No |
| | Mileage at Failure(s 85704 | | |
| | Vehicle Speed at Failure(s) | | |

## 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 | | | | ☐ Yes ☐ No |

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

LEFT AND RIGHT TIE RODS BROKE OFF WHILE CONSUMER WAS DRIVING, AND CONSUMER COULD NOT CONTROL THE VEHICLE. CONTACTED DEALER, AND THE DEALER FIXED THE PROBLEM.*AK

CONTINUE ON BACK IF NEEDED

Form Approved: O.M.B. No. 2127-0008

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

DOT Auto Safety Hotline

# Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

02 MAY 21 PM 2:16
OFFICE OF DEFECTS INVESTIGATION

**FOR AGENCY USE ONLY** 798

Date Received: 15-APR-2002

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No. 8007553

748169

**OWNER INFORMATION** (Type or Print)

[redacted]

JACKSON WI [redacted]

Work Numbe [redacted] (cell)
Home Numbe

*Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?* ☒ YES ☐ NO
*In the absence of an s[redacted]rovide your name and address to the vehicle manufacturer.*

Signature of Owner [redacted] Date 4/22/02

**VEHICLE INFORMATION**

| Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) | Vehicle Mak | Vehicle Mode | Vehicle Year | Current Odometer Readin |
|---|---|---|---|---|
| N/A 1FMFU18L7VLA06656 | FORD TRUCK | EXPEDITION | 1997 | 85,790 |

Purchase Date

☒ New ☐ Used

Dealer's Name JOHN P. LOCHEN FORD
City NEWBURG State WI Zip Code 53060

Engine Siz (CID/CC/L 5.4L
No Cylinders 8

☐ 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 Uti ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other | ☐ 2-Door ☐ 4-Door ☒ Stationwagon ☐ Pick Up ☒ Truck |

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

| Component | Part Name(s) | Location | Failed Part(s) |
|---|---|---|---|
| 01560000 | STEERING:LINKAGES:TIE ROD:END's L+R | ☒ Left ☒ Right ☒ Front ☐ Rear | ☒ Original ☐ Replacement |

No of Failures: 2

Date(s) of Failure(s) ~~01-FEB-2002~~ 15 APR 2002 RIGHT / LEFT 8-JUNE 2001
Mileage at Failure(s) 85704 / 74,626
Vehicle Speed at Failure(s) 2 MPH - REVERSE

Failed Part(s): ☒ Yes ☐ No

NHTSA Previously: ☐ Yes ☒ No

**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 Fatalities | Estimated Property Damage | Reported to Police |
|---|---|---|---|---|---|
| ☐ Yes ☒ No | ☐ Yes ☒ No | — | — | — | ☐ Yes ☒ No |

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

**LEFT AND RIGHT TIE RODS BROKE OFF WHILE CONSUMER WAS DRIVING, AND CONSUMER COULD NOT CONTROL THE VEHICLE. CONTACTED DEALER, AND THE DEALER FIXED THE PROBLEM."AK** BOTH BROKE OFF BETWEEN 75 & 85K MILES. I AM ORIGINAL OWNER W/ WIFE AS PRIMARY DRIVER (80%) VEHICLE HAS NEVER BEEN OFF-ROAD OR IN A CRASH. THERE WAS NEVER AN INDICATION OF ANY PROBLEM PRIOR TO THE (2) INCIDENTS.

CONTINUE ON BACK IF NEEDED

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

THIS IS A SERIOUS PART FAILURE / DEFECT THAT COULD HAVE JEPROWSED THE LIVES + SAFETY OF MY FAMILY THE $700.00 COST IS SECONDARY. RECALL THESE VEHICLES!!

FRANK G [redacted]

P.S. A COMPLAINT WAS FILED TO YOU APRIL 1998
REF: PE 98024 .... DETAILS ARE UNKNOWN TO ME.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

**National Highway Traffic Safety Administration**

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use $300

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590

# VEHICLE OWNER'S QUESTIONNAIRE

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

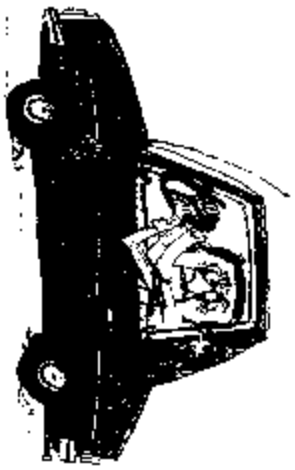
**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**

**1-888-327-4236**

DOT Auto Safety Hotline
(DASH) 2 DOT



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