



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 1039

Date Received

22-MAY-2002

Od_or _____
rt_dt _____
od_rt _____
ip_lr _____

Reference No.

8010309

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 and door frame)		Vehicle Make CHRYSLER	Vehicle Model SEBRING	Vehicle Year 1996	Current Odometer Reading
Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☐ Yes ☐ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____ Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02152000	Part Name(s) SUSPENSION:INDEPENDENT FRONT CONTROL ARM:LOWER:BALL	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Dates of Failure(s) 22-MAY-2002 Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	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 ☐ Yes ☐ No	Fire ☐ Yes ☐ No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING LOWER BALL JOINT BROKE APART, PULLING OUT AXLE, AND DAMAGING FENDER. HAD VEHICLE TOWED TO DEALER. PLEASE ADD VIN. *AK

COPIES OF THIS FORM ARE:

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 to 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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 1038	
U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received: <u>22-MAY-2002</u>	
		Od or _____ rt_dt _____ od_rt _____ up_itr _____	
OWNER INFORMATION (Type or Print) [Redacted] 755285 SOUTH AMBOY NJ [Redacted]		Reference No. 8010309	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☐ YES ☐ NO In the absence of an authorized signature, this report will be sent to the vehicle manufacturer.		Work Number _____ Home Number _____	
Signature of Owner _____ Date _____			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) <u>4C3AU52N3TE301760</u>		Vehicle Make <u>CHRYSLER</u> Vehicle Model <u>SEBRING</u> Vehicle Year <u>1996</u>	
Purchase Date <u>9/15/01</u> ☐ New ☒ Used		Dealer's Name <u>Loman Ford</u> City <u>Woodbridge</u> State <u>NJ</u> Zip Code <u>07095</u>	
Engine Size _____ (CID/CGI) No Cylinders <u>50</u>		☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection	
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☒ Car ☐ Van ☐ Minivan ☐ Other	Sport Utl ☐ Truck ☐ Motorcycle	Body Style ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>02152000</u>	Part Name(s) <u>SUSPENSION:INDEPENDENT FRONT CONTROL ARM:LOWER:BALL</u>	Location ☐ Left ☐ Front ☒ Right ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>22-MAY-2002</u> Mileage at Failure(s) <u>87,428</u> Vehicle Speed at Failure(s) <u>35</u>	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 ☐ Yes ☒ No	Fire ☐ Yes ☒ No	Number of Persons Injured <u>0</u>	Number of Fatalities <u>0</u>
Estimated Property Damage <u>0</u>		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING LOWER BALL JOINT BROKE APART, PULLING OUT AXLE, AND DAMAGING FENDER. HAD VEHICLE TOWED TO DEALER. PLEASE ADD VIN. *AK			

CONTINUE ON BACK IF NEEDED

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

I was driving down the road about 35 miles per hour and
all of a sudden the tire was off the car. After having
it checked I then found out that this problem was
a recall. A man Ford sold me a car that had a
recall problem I was never notified of the problem

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

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

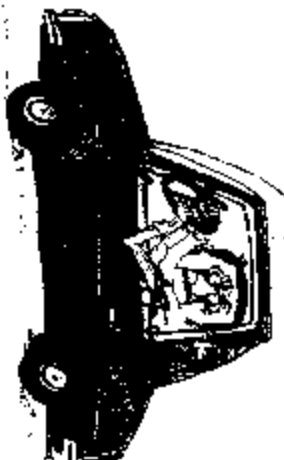
POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

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

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

20590+0001

1-888-DASH-2-DOT



DOT Auto Safety Hotline
(DASH) 2 DOT

1-888-327-4236

and dial toll free at

DASH2DOT

TO REPORT VEHICLE SAFETY DEFECTS
COMPLETE THIS FORM
OR

DOT AUTO SAFETY HOTLINE

QUESTIONNAIRE

**VEHICLE
OWNER'S**

U.S. Department of Transportation
National Highway Traffic Safety
Administration
<http://www.nhtsa.dot.gov/enline>