

U.S. Department
of TransportationNational 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

FOR AGENCY USE ONLY 151

Date Received

26-JAN-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

855694

 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) _____ (located at front of windshield on drivers side)	Vehicle Make FORD TRUCK	Vehicle Model EXPLORER	Vehicle Year 1991	Current Odometer Reading
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Purchase Date	Dealer's Name _____	Engine Size (CID/CC/L) _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
☐ New ☒ Used	City _____ State _____ Zip Code _____	No Cylinders _____	

Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 15700100	Part Name(s) EQUIPMENT:CARRIER:SPARE TIRE	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ 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 Damage	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING THE VEHICLE ABOUT 50MPH SPARE TIRE CAME OFF VEHICLE. DEALER HAS NOT SEEN VEHICLE, AND HAS NOT BEEN REPAIRED. *AK

CONTINUED ON BACK (REVERSE)

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) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 151 Date Received <u>28 JAN 2000</u> <u>00 MAR -8</u> Reference No. <u>855694</u> Date <u>2/26/2000</u>	
OWNER INFORMATION (Type or Print) 586847		Home Number	
Do you authorize NHTSA to provide a copy of your name and address to the manufacturer of your vehicle? In the absence of an authorized signature, please print your name and address to the vehicle manufacturer. Signature of Owner ☒ YES ☐ NO			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN.) (Located at bottom of windshield on driver's side) <u>1FMDU434X0MUC38844</u>		Vehicle Make <u>FORD TRUCK</u>	Vehicle Model <u>EXPLORER</u>
Vehicle Year <u>1991</u>		Current Odometer Reading <u>217,345</u>	
Purchase Date <u>4-25-95</u>	Dealer's Name <u>CLASSIC AUTOS LIMITED</u> City <u>CRYSTAL LAKE</u> State <u>IL</u> Zip Code <u>60014</u>		Engine Size (CID/CC/L) <u>6</u>
☐ New ☒ Used	No Cylinders <u>6</u>		☐ Turbo Diesel Gas ☒ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☐ Front ☒ Rear ☒ 4-Wheel	Vehicle Type ☐ Car ☒ Sport Ut ☐ Truck ☐ Motorcycle ☐ Van ☐ Minivan ☐ Other		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>16700100</u>	Part Name(s) <u>EQUIPMENT:CARRIER:SPARE TIRE</u>	Location ☐ Left ☐ Right ☒ Front ☒ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>1</u>	Date(s) of Failure(s) <u>JUNE 1999</u> Mileage at Failure(s) <u>198,000</u> Vehicle Speed at Failure(s) <u>55 m.p.h.</u>	Failed Part(s) Available? ☒ Yes ☐ No	NHTSA Previously Contacted? ☐ 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>NONE</u>	Number of Fatalities <u>NONE</u>
Estimated Property Damage <u>COST OF REPAIR.</u>		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE DRIVING THE VEHICLE ABOUT 60MPH SPARE TIRE CAME OFF VEHICLE. DEALER HAS NOT SEEN VEHICLE, AND HAS NOT BEEN REPAIRED. *AK JUNE 1999, WE PACKED UP THE EXPLORER FOR A TRIP TO MISSOURI. AFTER ENTERING RT. 53 AT DUNDEE ROAD HEADING SOUTH BOUND. I NOTICED THE PICK-UP BEHIND ME MAKING AN ERRATIC MOVEMENT. THAT'S WHEN I NOTICED A TIRE BOUNCE BEHIND THE PICK-UP AND SLAM INTO THE DIVIDER WALL.			
CONTINUE ON BACK IF NEEDED			
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Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail																					
INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)																					
TIRE IDENTIFICATION NO. *																					
D	O	T																		MANUFACTURER/TIRE NAME	SIZE
* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.																					
NARRATIVE DESCRIPTION (CONTINUED)																					

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

BUSINESS REPLY MAIL

U.S. Department of Transportation
National Highway Traffic Safety Administration
Auto Safety Hotline, NEF-11 HL
400 7th Street, SW
Washington, DC 20590

STANDARD TIME
PM

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

