

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

241

Date Received

31-JUL-2000

Od_or

rt_dt

od_rt

up_ltr

Reference No.

866455

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 vehicle or on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2FMDA5148WBA66831	FORD TRUCK	WINDSTAR	1998	

Purchase Date	Dealer's Name	Engine Size (CID/CCL)	☐ 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 ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No	Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☒ Van ☐ Minivan ☐ Other	Body Style ☐ Sport Vlt ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02113000	Part Name(s) SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:SI	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No. of Failures	Dates of Failure(s) 16-JUL-2000 Mileage at Failure(s) 00000 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)

PE 00 024/SUSPENSION COIL SPRING: WHILE TRAVELING AT 40 MPH FRONT COIL SPRING BROKE AND PUNCTURED DRIVER'S SIDE TIRE. NO INJURIES REPORTED. VEHICLE TOWED TO DEALER, AND REPAIRS WERE DONE AT CONSUMER'S EXPENSE. PLEASE PROVIDE ANY FURTHER DETAILS. *AK

CONTINUE ON BACK IF NEEDED

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 NATIONALWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 241 Date Received OCT-2 AM 10:25 31-JUL-2000 OFFICE DEFECTS INVESTIGATION Reference No. 866455 Work Number Home Number	
OWNER INFORMATION (Type or Print) [Redacted] 624139			
Do you authorize NHTSA to release information from the files of the manufacturer of your vehicle? In the absence of an [Redacted] your name and address to the vehicle manufacturer. Signature of Owner [Redacted] Date <u>9/18/00</u>		☒ YES ☐ NO	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2FMDA5148WBA66831	Vehicle Make FORD TRUCK	Vehicle Model WINDSTAR	Vehicle Year 1998
Purchase Date 05-97 ☒ New ☐ Used		Dealer's Name <u>County Ford</u> City <u>Burton</u> State <u>Ohio</u> Zip Code <u>44021</u>	
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 Belt ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Train ☒ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☒ Van ☐ Sport UM ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other		Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other <u>Minivan</u>
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 02113000	Part Name(s) SUSPENSION: INDEPENDENT FRONT ATTACHING MECHANISMS: S	Location ☒ Left ☐ Right ☒ Front ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures 1	Date(s) of Failure(s) <u>16-JUL-2000</u> Mileage at Failure(s) <u>83000</u> Vehicle Speed at Failure(s) <u>40 MPH</u>	Failed Part(s) Available? ☐ Yes ☒ No <u>Back Order</u>	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 <u>Lots of Smoke from Front End</u>	Number of Persons Injured _____	Number of Fatalities _____
Estimated Property Damage _____		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
PE 00 024/SUSPENSION COIL SPRING: WHILE TRAVELING AT 40 MPH FRONT COIL SPRING BROKE AND PUNCTURED DRIVER'S SIDE TIRE. NO INJURIES REPORTED. VEHICLE TOWED TO DEALER, AND REPAIRS WERE DONE AT CONSUMER'S EXPENSE. PLEASE PROVIDE ANY FURTHER DETAILS. *AK <u>See attached repair bills & towing bills</u> <u>Parts on National Backorder withheld a vehicle for 2 days. Dealer had no loaner available</u>			
CONTINUE ON BACK IF NEEDED			
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HARSHMAN & SONS, INC.

P.O. Box 1
SOUTHINGTON, OHIO 44470
(330) 898-2252 898-8485

DATE 7-16-00	TIME	A.M. P.M.	REQUESTED BY
LOCATION OF VEHICLE			
[REDACTED]		PHONE	
[REDACTED]		ZIP	
MILEAGE		SERVICE TIME	
FINISH		FINISH	
START		START	
TOTAL		TOTAL	
YEAR		NAME / MODEL / COLOR	
STATE		LIC. NO.	
VEHICLE ID. NO.		DRIVER	
☐ SLING/HOIST TOW ☒ WHEEL LIFT ☐ FLAT BED/RAMP ☐ START ☐ LOCK OUT		☐ FLAT TIRE ☐ OUT OF GAS ☐ WRECK ☐ RECOVERY ☐	
		SPECIAL EQUIPMENT ☐ SINGLE LINE WINCHING ☐ DUAL LINE WINCHING ☐ SNATCH BLOCKS ☐ SCOTCH BLOCKS ☐ DOLLY ☐	
VEHICLE TOWED TO			
REMARKS		TOWING CHARGE	
PAID THANK YOU		TOWING CHARGE 80.00	
		LABOR CHARGE	
		STORAGE CHARGE	
		TOTAL 80.00	
OPERATOR'S SIGNATURE		AUTHORIZED SIGNATURE	

25430

Harshman & Sons, Inc.

17425 Nash Rd
Middlefield Ohio 20702
44062

P.O. Box 825
Burton Ohio 44021
68581



INVOICE

COUNTRY FORD, LTD.

14624 Rapids Road @ Rt. 87

Burton, Ohio 44021

Burton (216) 834-5700

PAGE 1

SERVICE ADVISOR: 5448 JACK BLAIR

SERVICE ADVISOR: 5448 JACK BLAIR							
COLOR	YEAR	MAKE/MODEL	VIN	LICENSE	MILEAGE IN/OUT	TAG	
MIDNIGHT	RL998	FORD WINDSTAR	2FMDA5148WBA66831		82921/82921	T968	
DEL DATE	PROD DATE	WARR EXP	PROMISED	PC NO	RATE	PAYMENT	INV DATE
15APR1997	17MAR97		17:00 17JUL00			CASH	21JUL2000

R.O. OPENED READY OPTIONS: STK:7663 DLR:01457 ENG:3.8L SPI ENGINE
TRN:4 SPD AUTO O/D TRANSMISSION

10:03 17JUL00 16:11 21JUL00

LINE OPCODE TECH TYPE HOURS LIST NET TOTAL

A LT FRONT SPRING BROKE

9996 REPL BROKEN SPRING AND REPL TIRE

9278 CP \$ 50

1 F58Z*5310*C SPG ASY-FRT COIL

62.40 62.40 62.40

1 22560R16 TIRE

87.00 87.00 87.00

PARTS: 149.40 LABOR: 215.95 OTHER: 0.00 TOTAL LINE A: 365.35

SHOP SUPPLIES 7.00

PAID
JUL 21 2000

ON BEHALF OF SERVICING DEALER, I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREON IS ACCURATE UNLESS OTHERWISE SHOWN. SERVICES DESCRIBED WERE PERFORMED AT NO CHARGE TO OWNER. THERE WAS NO INDICATION FROM THE APPEARANCE OF THE VEHICLE OR OTHERWISE, THAT ANY PART REPAIRED OR REPLACED UNDER THIS CLAIM HAD BEEN CONNECTED IN ANY WAY WITH ANY ACCIDENT, NEGLIGENCE OR MISUSE. RECORDS SUPPORTING THIS CLAIM ARE AVAILABLE FOR (1) YEAR FROM THE DATE OF PAYMENT NOTIFICATION AT THE SERVICING DEALER FOR INSPECTION BY MANUFACTURER'S REPRESENTATIVE.

STATEMENT OF DISCLAIMER

The factory warranty constitutes all of the warranties with respect to the sale of this item/line. The Seller hereby expressly disclaims all warranties, either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Seller neither assumes nor authorizes any other person to assume for it any liability in connection with the sale of this item/line.

DESCRIPTION	TOTALS
LABOR AMOUNT	215.95
PARTS AMOUNT	149.40
GAS, OIL, LUBE	0.00
SUBLET AMOUNT	0.00
MISC. CHARGES	7.00
TOTAL CHARGES	372.35
LESS INSURANCE	0.00
SALES TAX	20.49
PLEASE PAY THIS AMOUNT	392.84

SIGNED: DEALER, GENERAL MANAGER OR AUTHORIZED PERSON (DATE)

CUSTOMER SIGNATURE

CUSTOMER COPY