

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 255

Date Received

08-AUG-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

867092

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 1995	Current Odometer Reading
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 _____					

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02740000	Part Name(s) TIRES: TREAD	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) <u>60</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 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police ☒ Yes ☐ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE DRIVING AT 60 MPH WITH FIRESTONE WILDERNESS/ATX TIRES ON THIS VEHICLE. ON JULY 31, 1998 THERE WAS A POP SOUND, AND SUDDENLY VEHICLE WAS ON IT'S ROOF. RIGHT REAR TIRE HAD PEELED LIKE A BANANA, CAUSING THIS. FORD WAS CONTACTED. *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.

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Date Received

00 SEP 18 PM 3:30
08-AUG-2000OFFICE
DEFECTS INVEST
 Del. or
rt. dt
off. no
up. Mr

Case No.

867092

Work Number

Home Number

OWNER INFORMATION (Type or Print)

625461

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of _____, I, NOT provide your name and address to the vehicle manufacturer.☒ YES☐ NO

Signature of Owner

Date 9/13/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
		FORD TRUCK	EXPLORER	1994	
Purchase Date	Dealer's Name		Engine Size (CID/CC/L)	☐ Turbo	☐ Diesel
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____	☐ Gas	☒ Fuel Injection
Transmission Type	Antilock Brakes	Restraint System		Cruise Control	Drive Train
☐ Manual ☒ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag		☒ Yes ☐ No	☐ Front ☐ Rear ☒ 4-Wheel
Vehicle Type		Body Style			
☐ Car ☒ Sport Utility Truck ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____			

FAILED COMPONENT(S)/PART(S) INFORMATION

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No of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s) 60	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 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police ☒ Yes ☐ No
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front end was hit - air bag never went off
insurance company was alerted to the fact
this was a product defect.

CONTINUE ON BACK IF NEEDED

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