Form Approved: O.M.B. No. 2127-0039

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

FOR AGENCY USE ONLY 156

Date Received: 06-OCT-2000

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

Reference No.: 872460

[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.) (located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FMNU41S1YEE35797	FORD TRUCK	EXCURSION	2000	

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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
02000000	SUSPENSION	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	Date(s) of Failure(s): 30-SEP-2000	☐ Yes ☐ No	☐ 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)

WHILE DRIVING 45 MPH AND MAKING A STOP VEHICLE GOES TO THE LEFT WHICH MAY CAUSE A CRASH. FORD IS AWARE OF PROBLEM, BUT HAS NO SOLUTION. PLEASE PROVIDE FURTHER INFORMATION. *AK

CONTINUED ON BACK IF NEEDED

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

U.S. Department of Transportation
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DOT Auto Safety Hotline

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
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FOR AGENCY USE ONLY 156

Date Received
RECEIVED
00 NOV 27 AM 11
06-OCT-2000
OFFICE OF DEFECTS INVESTIGATION

Odr
rtd
od_rt
up_ltr

Reference No.
872460

OWNER INFORMATION (Type or Print)

[redacted] 644708

Work Numbe [redacted]
Home Numbe [redacted]

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

Signature of Owne [redacted] Date 11/20/00

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of windshield or driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FMNU41S1YEE36797	FORD TRUCK	EXCURSION	2000	1209

Purchase Date 8/29/00 ☒ New ☐ Used

Dealer's Name SEMINOLE FORD AUTOMOTION USA Co.
City SANFORD State FL Zip Code 32771

Engine Size (CID/CC/L 6.8L
No Cylinders 10
☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☒ Automatic	☒ Yes ☒ No	☒ 3-Point Belt ☐ Motorbelt ☒ Driverside Airbag ☐ 2-Point Belt ☒ Passengerside Airbag	☒ Yes ☒ No	☐ Front ☐ Rear ☒ 4-Wheel	☐ Car ☒ Sport Utl ☐ 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)
02000000	SUSPENSION UNKNOWN	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s) / Mileage at Failure(s) / Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
CONTINUOUS	30-SEP-2000 / CONTINUOUS / ABOVE 45 MPH	☐ Yes ☐ No	☐ 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	N/A	N/A	N/A	☐ Yes ☒ No

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

ABOVE

WHILE DRIVING 45 MPH AND MAKING A STOP VEHICLE GOES TO THE LEFT WHICH MAY CAUSE A CRASH. FORD IS AWARE OF PROBLEM, BUT HAS NO SOLUTION. PLEASE PROVIDE FURTHER INFORMATION. *AK

CONTINUE ON BACK IF NEEDED