

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 335

Date Received

12-OCT-2000

 Od_or _____
 Rt_dt _____
 od_rt _____
 up_ltr _____

Reference No.

872881

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	Vehicle Model	Vehicle Year	Current Odometer Reading
1FMDU34X4TUA71581		FORD TRUCK	EXPLORER	1996	
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	Antilock Brakes	Restraint System		Cruise Control	Drive Train
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Motorbell ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag		☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel
Vehicle Type		Body Style			
☐ Car ☐ Sport Ult ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____		☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____			

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02112000	Part Name(s) SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures 0	Date(s) of Failure(s) 12-OCT-1999 Mileage at Failure(s) 111000 Vehicle Speed at Failure(s) 2	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)

FRONT STABILIZER LEAKAGE HAD TO BE REPAIRED. AFTED CONSUMER HEARD A SNAP, A MINUTE LATER, CAR WENT TO SHOULDER LIKE A BIG WIND HAD PUSHED IT. VEHICLE STARTED TO ROCK BACK AND FORTH, AND IT WAS HARD TO STEER.*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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 U.S. Department of Transportation National Highway Traffic Safety Administration		Vehicle Owner's Questionnaire (VOQ) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline	
OWNER INFORMATION (Type or Print) 645872		RECEIVED OFFICE OF INVESTIGATION 872831 Work Num Home Num	
Signature of Owner		Date <u>10/21/2000</u>	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) <u>1FMDU34X4TUA71581</u> (Located on bottom of windshield or driver's side)	Vehicle Make <u>FORD TRUCK</u>	Vehicle Model <u>EXPLORER</u>	Vehicle Year <u>1998</u>
Purchase Date ☐ New ☒ Used	Dealer's Name <u>Thoroughbred Ford</u> City <u>Kansas City</u> State <u>Mo</u> Zip Code _____	Engine Size (CID/GCC) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☒ Gas ☐ Fuel Injection
Transmission Type ☐ Manual ☒ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☒ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	Cruise Control ☐ Yes ☒ No
Drive Train ☐ Front ☒ Rear ☒ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other	☒ Sport-UTV ☐ Truck ☐ Motorcycle	Body Style ☐ 2-Door ☒ 4-Door ☐ Stationwagon ☐ Pick-Up Truck ☒ Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component <u>02112000</u>	Part Name(s) <u>SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:3</u>	Location ☒ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures <u>0</u>	Date(s) of Failure(s) <u>12-OCT-1999</u> Mileage at Failure(s) <u>111000</u> Vehicle Speed at Failure(s) <u>0</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>0</u>	Number of Fatalities <u>0</u>
Estimated Property Damage <u>0</u>		Property Is Being ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
<u>Linkage</u> FRONT STABILIZER LEAKAGE HAD TO BE REPAIRED. AFTED CONSUMER HEARD A SNAP, A MINUTE LATER, CAR WENT TO SHOULDER LIKE A BIG WIND HAD PUSHED IT. VEHICLE STARTED TO ROCK BACK AND FORTH, AND IT WAS HARD TO STEER.*AK			
CONTINUE ON BACK IF NEEDED			
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