

 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 180	
U.S. Department of Transportation National Highway Traffic Safety Administration		Date Received 20-DEC-2000	Od_or _____ rt_dt _____ od_rt _____ up_tr _____
		Reference No. 876781	
OWNER INFORMATION (Type or Print) 			
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.		Work Number _____ Home Number _____	
Signature of Owner _____		Date ____/____/____	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield or driver's side) 1FMDU34X5TUB15829	Vehicle Mak FORD TRUCK	Vehicle Mode EXPLORER	Vehicle Year 1996
Current Odometer Reading _____			
Purchase Date ☒ New ☐ Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Siz (CID/CC/L) _____ No Cylinders _____
Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio ☐			
Transmission Type ☐ Manual ☐ Automatic	Antilock Brakes ☒ Yes ☐ No	Restraint System ☐ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ Passengerside Airbag	Cruise Control ☒ Yes ☐ No
Drive Trail ☐ Front ☐ Rear ☐ 4-Wheel		Vehicle Type ☐ Car ☐ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☒ Truck
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 06400000 03250000	Part Name(s) FUEL:THROTTLE LINKAGES AND CONTROL BRAKES:HYDRAULIC:ANTI-SKID SYSTEM	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failures _____	Date(s) of Failure(s) _____ Mileage at Failure(s) 38000 Vehicle Speed at Failure(s) _____	Failed Part(s) ☐ Yes ☐ No	NHTSA Previously ☐ 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 Fatalitie _____
Estimated Property Damag _____		Reported to Polic ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
CONSUMER WAS DRIVING AT 55 MPH ON EXPRESSWAY WHEN VEHICLE STARTED TO ACCELERATE ON ITS OWN , REACHING SPEEDS OF 90 MPH . CONSUMER PUT BOTH FEET ON BRAKE PEDAL, BUT VEHICLE DID NOT STOP. CONSUMER HAD TO SHIFT INTO NEUTRAL AND TURN OFF IGNITION, AND IT TOOK ABOUT 2 MILES BEFORE VEHICLE STOPPED. *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 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.			