



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

Auto Safety Hotline

Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>

FOR AGENCY USE ONLY

241

Date Received

13-FEB-2001

Od_or

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pd_rt

ip_ltr

Reference No.

880463

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
2FMDA5149TBA47040	FORD TRUCK	WINDSTAR	1996	

Purchase Date ☐ New ☒ Used	Dealer's Name _____ City _____ State _____ Zip Code _____	Engine Size _____ (CID/CC/L) _____ No Cylinders _____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection
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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 ☐ Sport Util ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other _____	Body Style ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02413000	Part Name(s) SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:S	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
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No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s)	Failed Part(s) Available? ☐ Yes ☐ No	NHTSA Previously Contacted? ☐ Yes ☐ No
	10-SEP-2000 65000		

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)

EA 00 027/ SUSPENSION COIL SPRING BREAKAGE; RIGHT FRONT COIL SPRING BROKE WHILE DRIVING AT 55-60 MPH, AND PUNCTURED TIRE. REPAIRS MADE AT AN INDEPENDENT REPAIR SHOP. DEALER/MANUFACTURER WERE NOT NOTIFIED AT THIS TIME. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *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.

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

13-FEB-2001

 Od_or
rt_dt
dd_yr
up_ltr

Reference No.

880463

OWNER INFORMATION (Type or Print)

674441

Work Number

Home Number

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 3/4/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2FMDA5149TBA47040	FORD TRUCK	WINDSTAR	1996	72,000
Purchase Date 3/96	Dealer's Name ARLINGTON HTS. FORD		Engine Size (CID/CC) 3.8	☐ Turbo ☐ Diesel ☒ Gas Fuel Injection
☒ New ☐ Used	City ARLINGTON HTS. State IL Zip Code		No Cylinders 6	☒ 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 ☐ Minivan ☐ Other		Body Style ☐ Sport Ult Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other VAN		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02113000	Part Name(s) SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:S	Location ☐ Left ☒ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No. of Failures 1	Date(s) of Failure(s) 10-SEP-2000 Mileage at Failure(s) 65000 Vehicle Speed at Failure(s) 120	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)

EA 00 027/ SUSPENSION COIL SPRING BREAKAGE; RIGHT FRONT COIL SPRING BROKE WHILE DRIVING AT 55-60 MPH, AND PUNCTURED TIRE. REPAIRS MADE AT AN INDEPENDENT REPAIR SHOP. DEALER/MANUFACTURER WERE NOT NOTIFIED AT THIS TIME. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK

MANUFACTURER HAS BEEN NOTIFIED.

SEE ATTACHED COPY OF REPAIR BILL.

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.

