



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

22-MAR-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

883889

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) (Location at bottom of windshield and driver's side door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
PLEASE FILL IN	FORD TRUCK	EXPLORER	1992	

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 ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Bel ☐ 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 _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10160000	Part Name(s) VISUAL SYSTEMS:SUN ROOF ASSEMBLY (8/82)	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) C7-FEB-2001 110000 Mileage 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 Fatalities	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

RECALL 97 V 235 001/SUNROOF LABEL: SUNROOF CAME OFF WHILE DRIVING AT HIGHWAY SPEED OF 60 MPH. DEALER / MANUFACTURER NOTIFIED, AND INFORMED CONSUMER THAT VEHICLE WAS NOT COVERED UNDER RECALL. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER.

*AK

COPIES OF THIS FORM ARE:

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.

 DOT Auto Safety Hotline Vehicle Owner's Questionnaire (VOQ) U.S. Department of Transportation National Highway Traffic Safety Administration NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4236 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 241 Date Received: <u>22-MAR-2001</u> Out_of: _____ of: _____ od_r: _____ up_itr: _____ Reference No.: <u>883889</u> Work Number: _____ Home Number: _____	
OWNER INFORMATION (Type or Print) <u>681855</u>			
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? ☒ YES ☐ NO In the absence of an authorized signature, please provide 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) PLEASE FILL IN		Vehicle Make FORD TRUCK	Vehicle Model EXPLORER
		Vehicle Year 1992	Current Odometer Reading
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 ☐ Manual ☐ Automatic	Antilock Brakes ☐ Yes ☒ No	Restraint System ☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	Cruise Control ☐ Yes ☒ No
		Drive Train ☐ Front ☐ Rear ☐ 4-Wheel	Vehicle Type ☐ Car ☐ Van ☐ Minivan ☐ Other _____ ☐ Sport Utl ☐ Truck ☐ Motorcycle
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 10180000	Part Name(s) VISUAL SYSTEMS: SUN ROOF ASSEMBLY (8/82)	Location ☐ Left ☐ Front ☐ Right ☐ Rear	Failed Part(s) ☒ Original ☐ Replacement
No of Failures	Date(s) of Failure(s) <u>07-FEB-2001</u> Mileage at Failure(s) <u>110000</u> Vehicle Speed at Failure(s) <u>60 miles per hour</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	Number of Fatalities
		Estimated Property Damage	Reported to Police ☐ Yes ☒ No

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

RECALL 97 V 235 001/SUNROOF LABEL: SUNROOF CAME OFF WHILE DRIVING AT HIGHWAY SPEED OF 60 MPH. DEALER / MANUFACTURER NOTIFIED, AND INFORMED CONSUMER THAT VEHICLE WAS NOT COVERED UNDER RECALL. PLEASE FEEL FREE TO PROVIDE ANY FURTHER DETAILS ON THIS MATTER. *AK

Please tell me where I can get a new (or used) sunroof without paying \$2500 or \$3000 for - I can not drive my car now & don't feel I should be punished

CONTINUE ON BACK IF NEEDED

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THESE ARE THE TERMS AND CONDITIONS OF THE SALE OF THE ABOVE DESCRIBED GOODS TO YOU BY THE ABOVE DESCRIBED VENDOR.