



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 117

Date Received

04-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

887482

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)		Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
2FMDA5143WVB04322		FORD TRUCK	WINDSTAR	1998	
Purchase Date	Dealer's Name _____		Engine Size (CID/CC/L _____)	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio	
☐ New ☒ Used	City _____ State _____ Zip Code _____		No Cylinders _____		
Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ Manual ☐ Automatic	☐ Yes ☒ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☒ Van ☐ Minivan ☐ Other
		☐ Motorbelt ☐ 2-Point Bel			☐ Sport Util ☐ Truck ☐ Motorcycle
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02113000	Part Name(s) SUSPENSION:INDEPENDENT FRONT ATTACHING MECHANISMS:	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 16-APR-2001 Mileage at Failure(s) 88	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)

FRONT COIL SPRINGS BROKE WHILE DRIVING 5MPH. NOTICED RUBBING AGAINST TIRE WHICH WAS BECOMING FRAYED. TOOK TO DEALERSHIP, AND MECHANIC INDICATED THAT PROBLEM WAS DEFINITELY FRONT COIL SPRINGS, BUT DID NOT REPLACE THEM. OWNER WORKING WITH DEALERSHIP. AK

COPIES OF REPORTS - FREE -

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 117 Date Received: SEP 25 AM 10:27 04-MAY-2001 OFFICE DEFECTS INVESTIGATION	
OWNER INFORMATION (Type or Print) 690151		Od or _____ rt dt _____ co rt _____ up tr _____ Reference No. 887482	
Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.		☐ YES ☒ NO	
Signature of Owner _____		Date _____	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side) 2FMDA5143WVB04322	Vehicle Make FORD TRUCK	Vehicle Model WINDSTAR	Vehicle Year 1998
		Current Odometer Reading 88,000	
Purchase Date Jan 04, 98 ☐ New ☒ Used	Dealer's Name Adams Chevrolet City Arhol State Mass Zip Code 01331		Engine Size (CID/CCIL) _____ No Cylinders _____ ☐ Turbo Diesel ☒ Gas 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 ☐ Sport Utl ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	
Body Style ☐ 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 ☐ Right ☒ Front ☐ Rear
		Failed Part(s) ☒ Original ☐ Replacement	
No of Failures _____	Date(s) of Failure(s) 16 APR-2001 Mileage at Failure(s) 88 Vehicle Speed at Failure(s) _____		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 Were able to	Number of Fatalities spot problem
		Estimated Property Damage accident occurred	
		Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
FRONT COIL SPRINGS BROKE WHILE DRIVING 5MPH. NOTICED RUBBING AGAINST TIRE WHICH WAS BECOMING FRAYED. TOOK TO DEALERSHIP, AND MECHANIC INDICATED THAT PROBLEM WAS DEFINITELY FRONT COIL SPRINGS, BUT DID NOT REPLACE THEM. OWNER WORKING WITH DEALERSHIP.*AK Dealership did replace them at a cost to us. Presently negotiating for reimbursement			
CONTINUE ON BACK IF NEEDED			
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