



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 §20

Date Received

24-MAY-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

889069

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
FILL IN PLEASE	FORD TRUCK	EXPLORER	1991	

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 15703000	Part Name(s) EQUIPMENT: CAR: TOP LUGGAGE CARRIER	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) 17-MAY-2001 Failure(s) 125000 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 C	Number of Fatalities 0	Estimated Property Damag	Reported to Police ☐ Yes ☒ No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHILE TRAVELING AT APPROXIMATELY 60 MPH FACTORY INSTALLED LUGGAGE RACK ON TOP OF VEHICLE BROKE, AND PIECES OF RACK FLEW OFF WITH 6 FOOT LADDER THAT WAS ON RACK. THERE WAS NO CRASH OR DAMAGE RESULTING FROM THIS TO OTHER VEHICLES. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.*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 920 Date Received: <u>24 MAY 2001</u> Office: <u>DEFECTS INVESTIGATION</u> Reference No.: <u>889069</u> Work Number: <u>[REDACTED]</u> Home Number: <u>[REDACTED]</u>	
OWNER INFORMATION (Type or Print) [REDACTED] 693796		DEFECTS INVESTIGATION	
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. Signature of Owner: <u>[REDACTED]</u> Date: <u>6/5/01</u> ☒ YES ☐ NO			
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year
FILL IN PLEASE	FORD TRUCK	EXPLORER	1991
Current Odometer Reading: <u>125,803</u>		Engine Size (CID/CC/L): <u>6</u> ☐ Turbo ☐ Diesel ☐ Gas ☒ Fuel Injection	
Purchase Date: <u>12/1/99</u> ☐ New ☒ Used	Dealer's Name: <u>Neighbor</u> City: <u>Hartland</u> State: <u>WI</u> Zip Code: <u>53029</u>		No Cylinders: <u>6</u>
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 ☐ Truck ☐ Motorcycle ☐ Van ☐ Minivan ☐ Other	Body Style: ☒ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component: <u>15703000</u>	Part Name(s): <u>EQUIPMENT: CAR: TOP LUGGAGE CARRIER</u>	Location: ☐ Left ☒ Right ☐ Front ☐ Rear	Failed Part(s): ☒ Original ☐ Replacement
No of Failures: _____	Date(s) of Failure(s): <u>17-MAY-2001</u> Mileage at Failure(s): <u>125000</u> 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: <u>0</u>	Number of Fatalities: <u>0</u>
Estimated Property Damage: <u>\$400.00</u>		Reported to Police: ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)			
WHILE TRAVELING AT APPROXIMATELY 60 MPH FACTORY INSTALLED LUGGAGE RACK ON TOP OF VEHICLE BROKE, AND PIECES OF RACK FLEW OFF WITH 6 FOOT LADDER THAT WAS ON RACK. THERE WAS NO CRASH OR DAMAGE RESULTING FROM THIS TO OTHER VEHICLES. PLEASE PROVIDE ANY ADDITIONAL INFORMATION/ATTACHMENTS.*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.			

Fold to show Return Address (no stamp needed) Fasten with tape or staple and mail

INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

TIRE IDENTIFICATION NO.*

D O T

MANUFACTURER/TIRE NAME

SIZE

* The identification number consists of 7 to 10 letters and numerals following the letters DOT. It is usually located near the rim flange on the side opposite the whitewall or on either side of a blackwall tire.

NARRATIVE DESCRIPTION (CONTINUED)

Correct on front.

☆ U.S. G.P.O.: 1992-522-867 / 50086

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

400 Seventh St., S.W.
Washington, D.C. 20590

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST CLASS PERMIT NO. 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL HWY TRAFFIC SAFETY ADMIN.

U.S. Department of Transportation
National Highway Traffic Safety Administration
Information Management Staff NSA-10.01
400 7th Street, SW
Washington, DC 20590

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

