Form Approved: OMB No. 2127-0042

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: 26-JUN-2001

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
np_ltr ____ ____

Reference No.: 891193

[redacted]

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 of number and check digit)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Readin
1FMDU34X8FUB48788	FORD TRUCK	EXPLORER	1995	

Purchase Dat		Engine Size	
☐ New ☒ Used	Dealer's Name_____ City_____ State_____ Zip Code_____	(CID/CC/L ____ No Cylinders ____	☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injectio

Transmission Type	Antilock Brakes	Restraint System	Cruise Contro	Drive Trai	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Bel	☐ Yes ☒ No	☐ Front ☐ Rear ☐ 4-Wheel	☐ Car ☐ Van ☐ Minivan ☐ Other_____ ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other_____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s	Location	Failed Part(s
01120000	STEERING:COLUMN	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failure	Date(s) of Failure(s)	Failed Part(s)	NHTSA Previously
2	25-OCT-1995 70000	☐ Yes ☐ No	☐ Yes ☐ No

Mileage at Failure(s)_____

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies) on the back of this form)

Crash	Fire	Number of Persons Injured	Number of Fatalitie	Estimated Property Damag	Reported to Polic
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

AT 5,000 MILES A POPPING SOUND IS COMING FROM STEERING COLUMN. DEALER WAS NOTIFIED, AND REPLACED STEERING COLUMN ON TWO SEPARATE OCCASIONS. BUT, PROBLEM IS STILL REOCCURRING. PROVIDE ANY FURTHER INFORMATION. *AK

CONTINUED ON REVERSE

Form Approved O.M.B. No. 2127-0001

DOT Auto Safety Hotline

U.S. Department of Transportation
National Highway Traffic Safety Administration

Vehicle Owner's Questionnaire (VOQ)

NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

RECEIVED
2001 OCT 24 AM 9:
DEFECTS INVESTIGATION

FOR AGENCY USE ONLY 241

Date Received
26-OCT-2001

Od_or
pt_dt
od_rt
up_ltr

Reference No.
891193

699041

Work Numb
Home Numb

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 [redacted] Date 7/19/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (Located at bottom of windshield or driver's door)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FMDU34X8FUB48788	FORD TRUCK	EXPLORER	1995	70,000

Purchase Date: 5-95 ☒ New ☒ Used error

Dealer's Name: Choate Motor Co.
City: Sparta State: NC Zip Code: 28675

Engine Size (CID/CC/L): ____ No Cylinders: ____
☐ Turbo ☐ Diesel ☐ Gas ☐ Fuel Injection

Transmission Type	Anti-lock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☑ Automatic	☒ Yes ☐ No	☒ 3-Point Belt ☐ Motorbelt ☐ Driverside Airbag ☐ 2-Point Belt ☐ Passengerside Airbag	☑ Yes ☒ No error	☐ Front ☐ Rear ☑ 4-Wheel	☐ Car ☑ Sport Utl ☐ Van ☐ Truck ☐ Minivan ☐ Motorcycle ☐ Other	☐ 2-Door ☑ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Part Name(s)	Location	Failed Part(s)
01120000	STEERING;COLUMN	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures: 1 error

Date(s) of Failure(s): 25-OCT-1995
Mileage at Failure(s): 70000
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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No				☐ Yes ☒ No

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

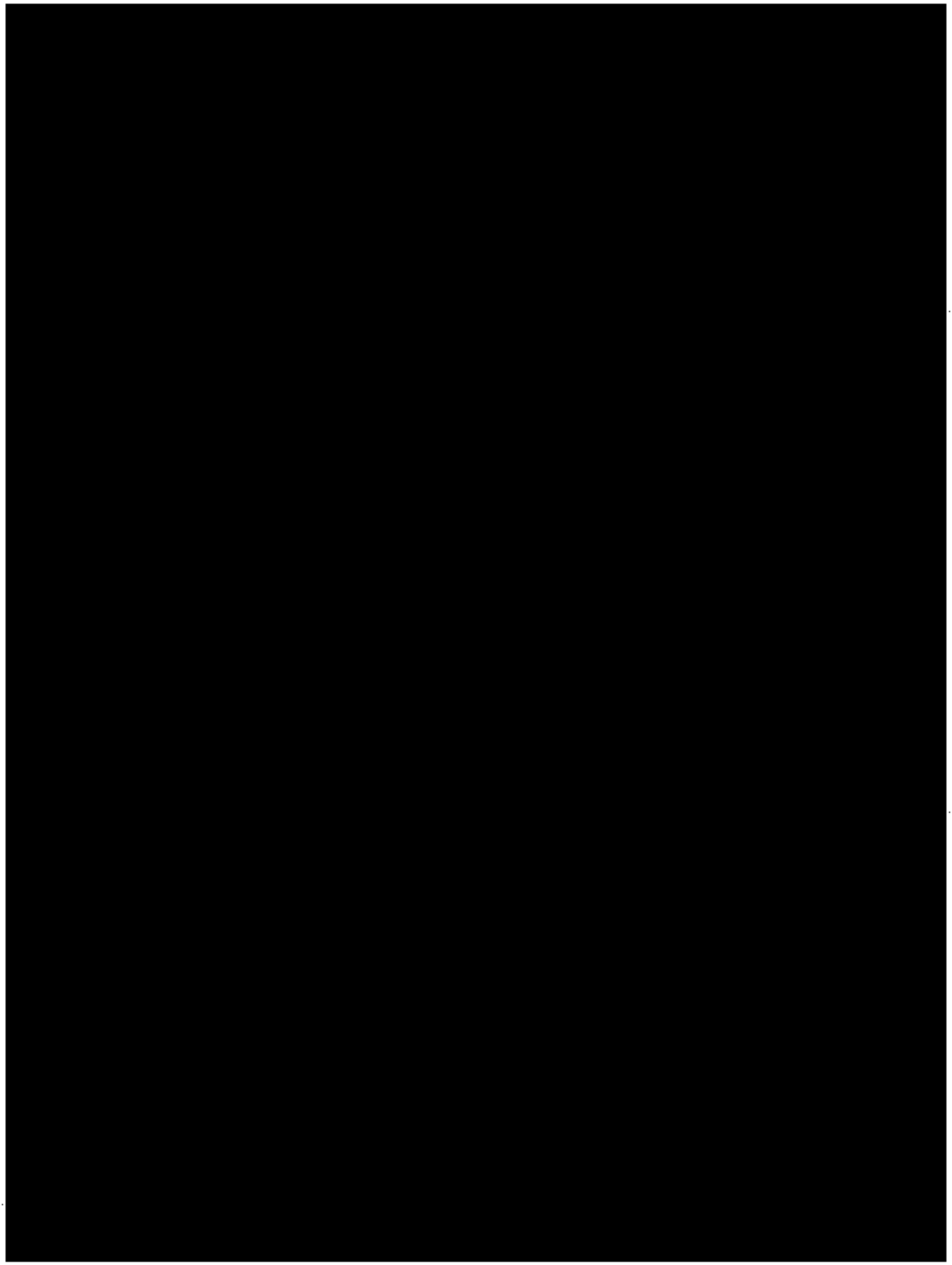
AT 5,000 MILES A POPPING SOUND IS COMING FROM STEERING COLUMN. DEALER WAS NOTIFIED, AND REPLACED STEERING COLUMN ON TWO SEPARATE OCCASIONS. BUT, PROBLEM IS STILL REOCCURRING. PROVIDE ANY FURTHER INFORMATION. *AK

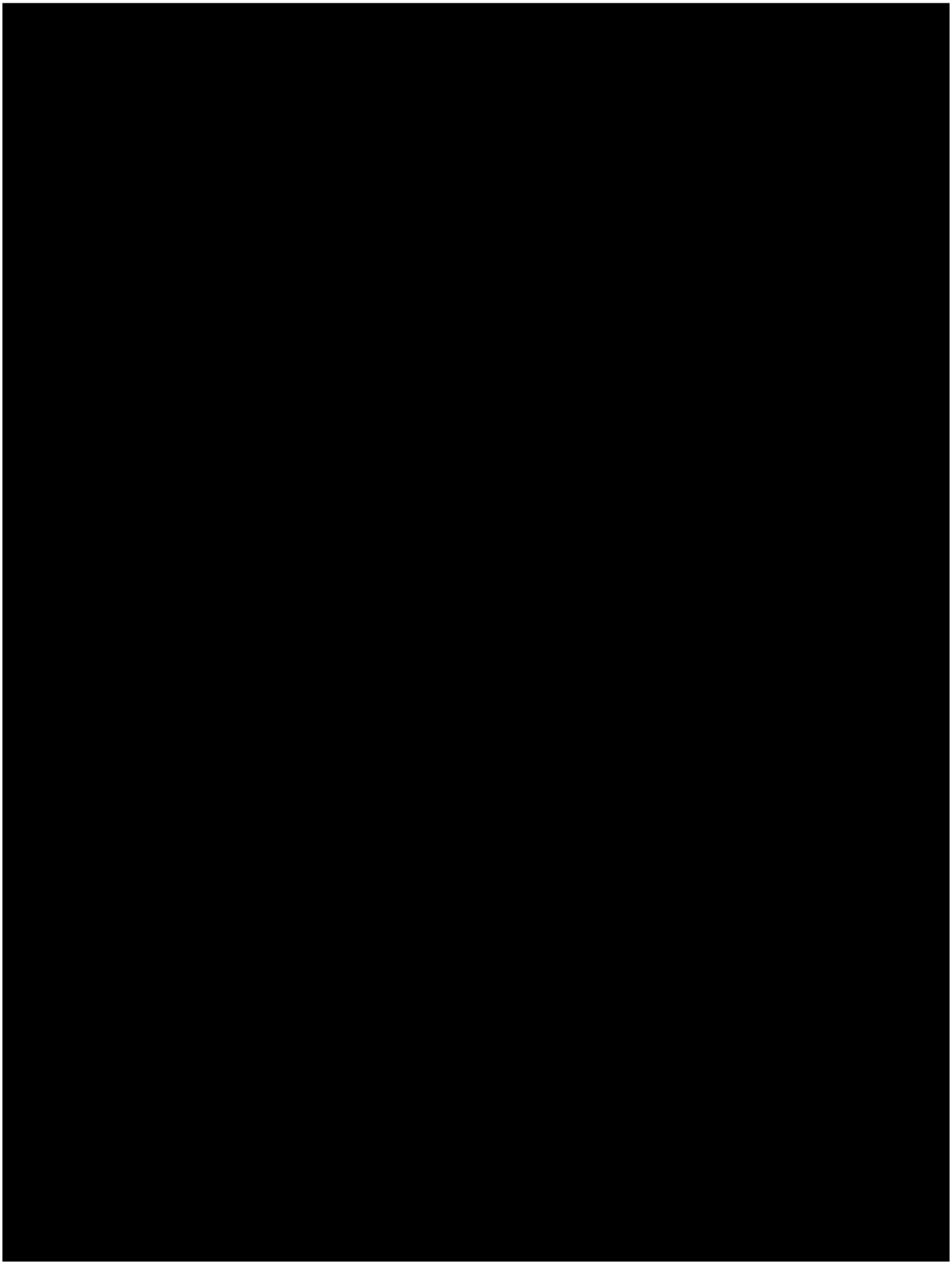
* See enclosed papers *

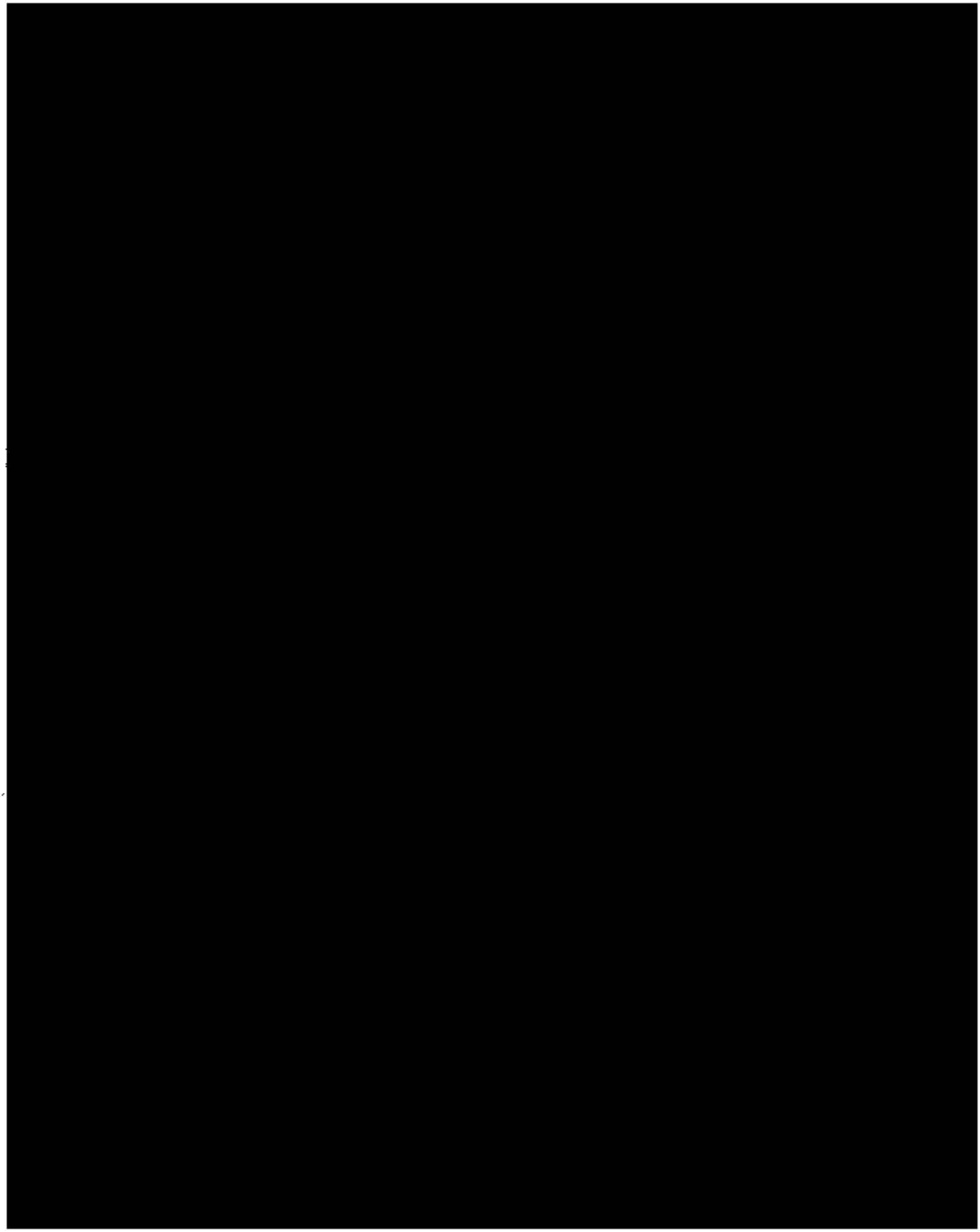
CONTINUE ON BACK IF NEEDED

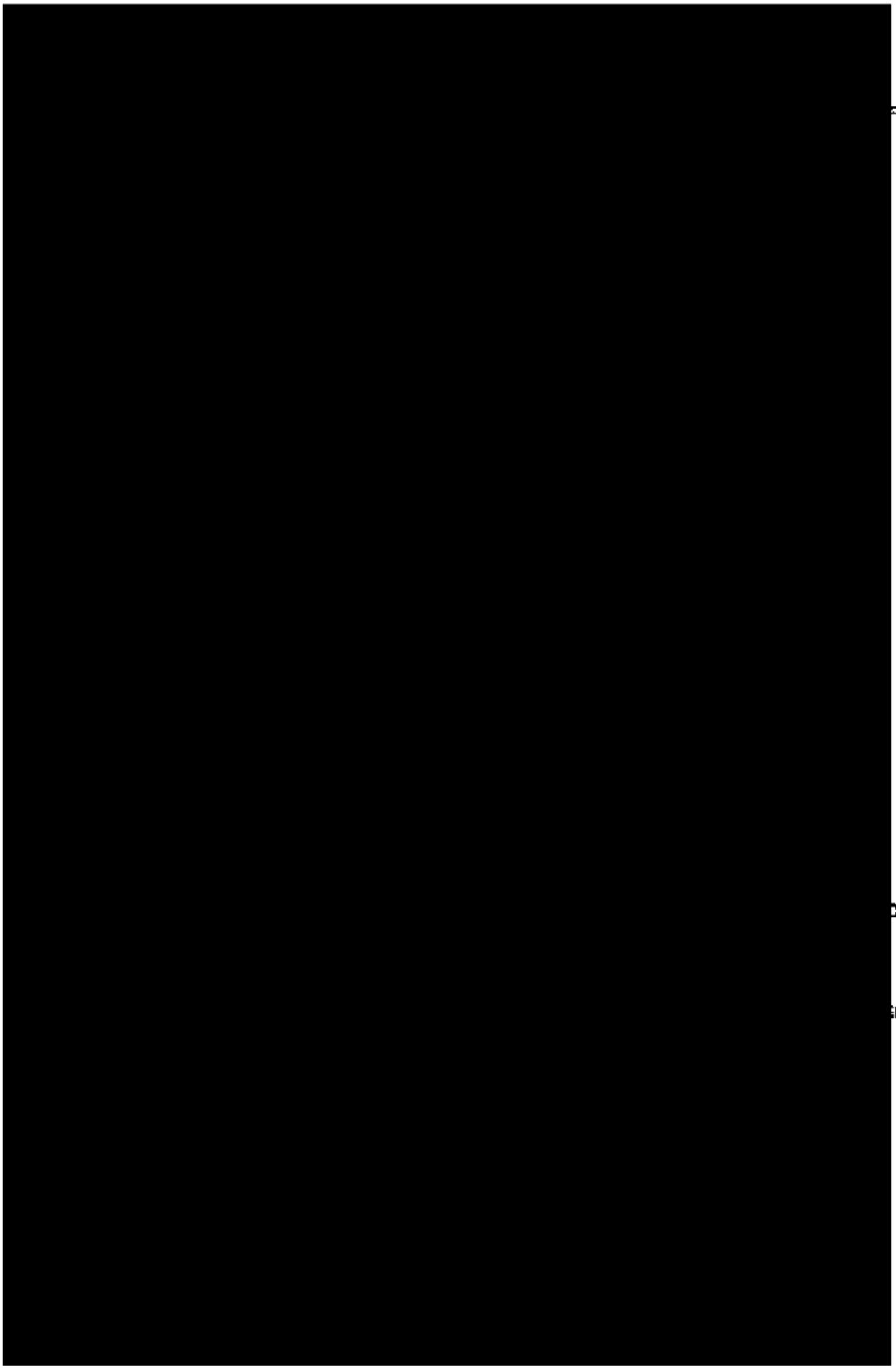
THE FOLLOWING PAGES ARE WITHHELD TO PROTECT UNWARRANTED INVASION OF PERSONAL PRIVACY PURSUANT TO EXEMPTION 6 OF THE FREEDOM OF INFORMATION ACT, 5 U.S.C. 552(b)(6)

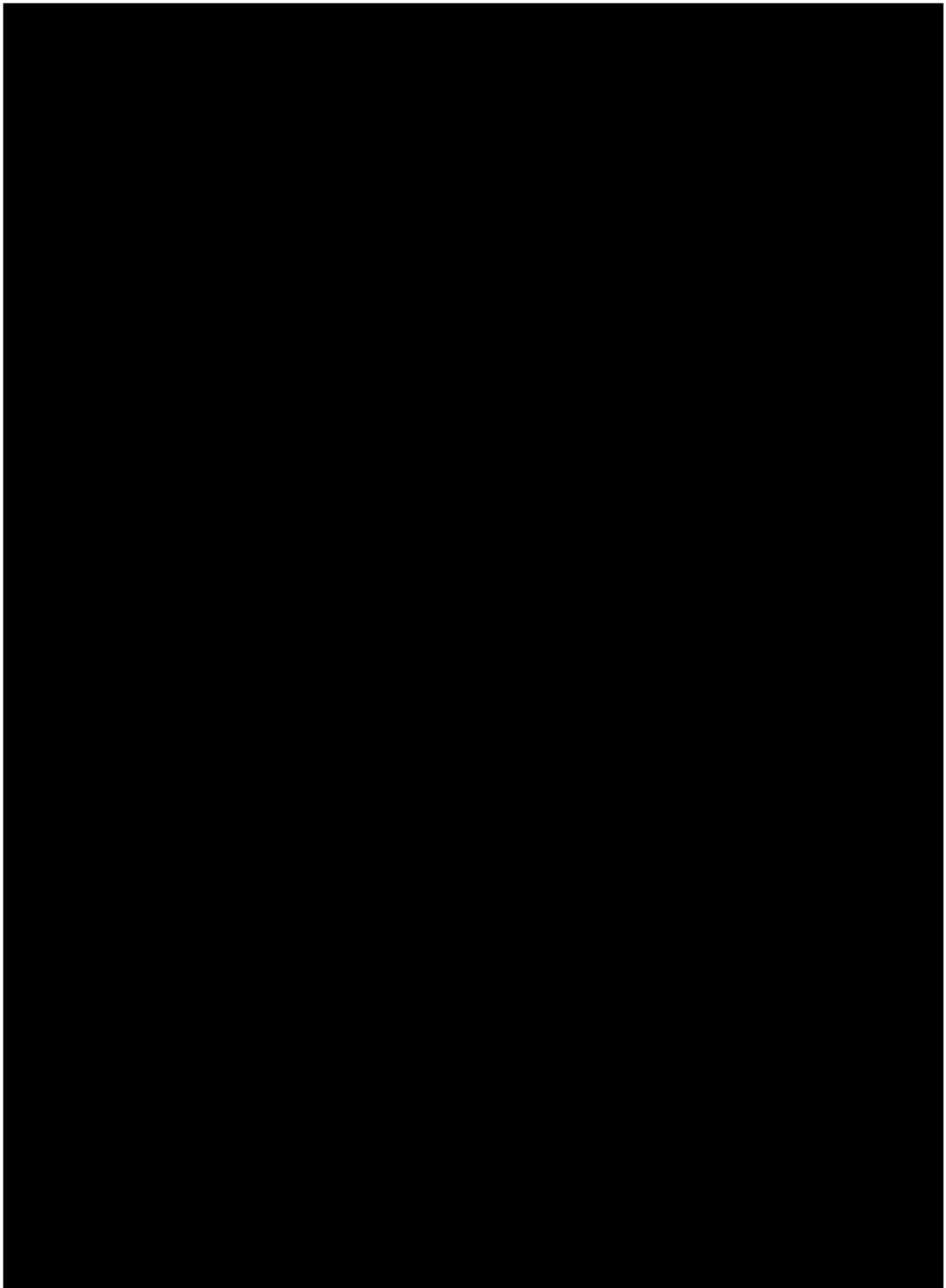
(Page 1 through Page 27 #)

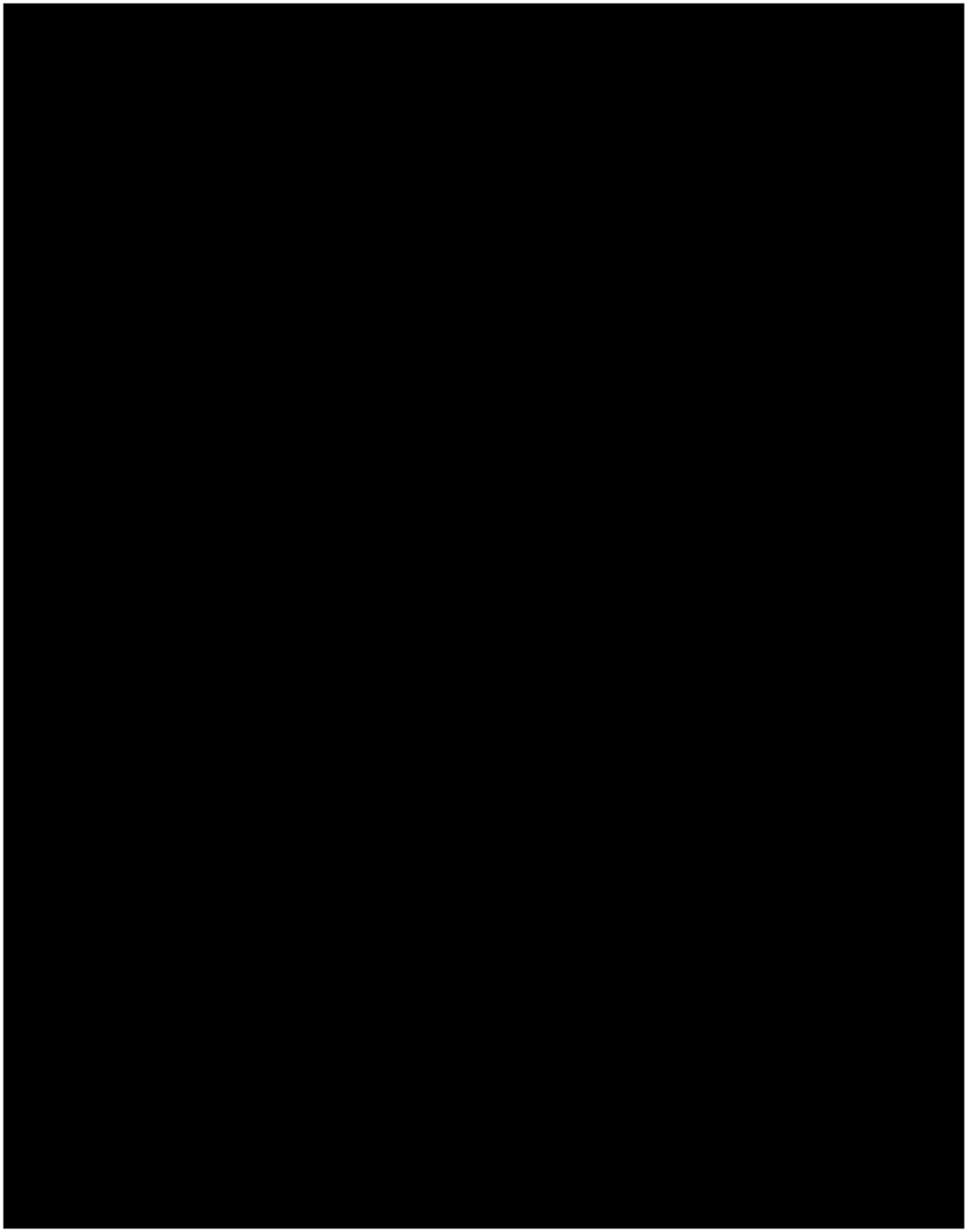


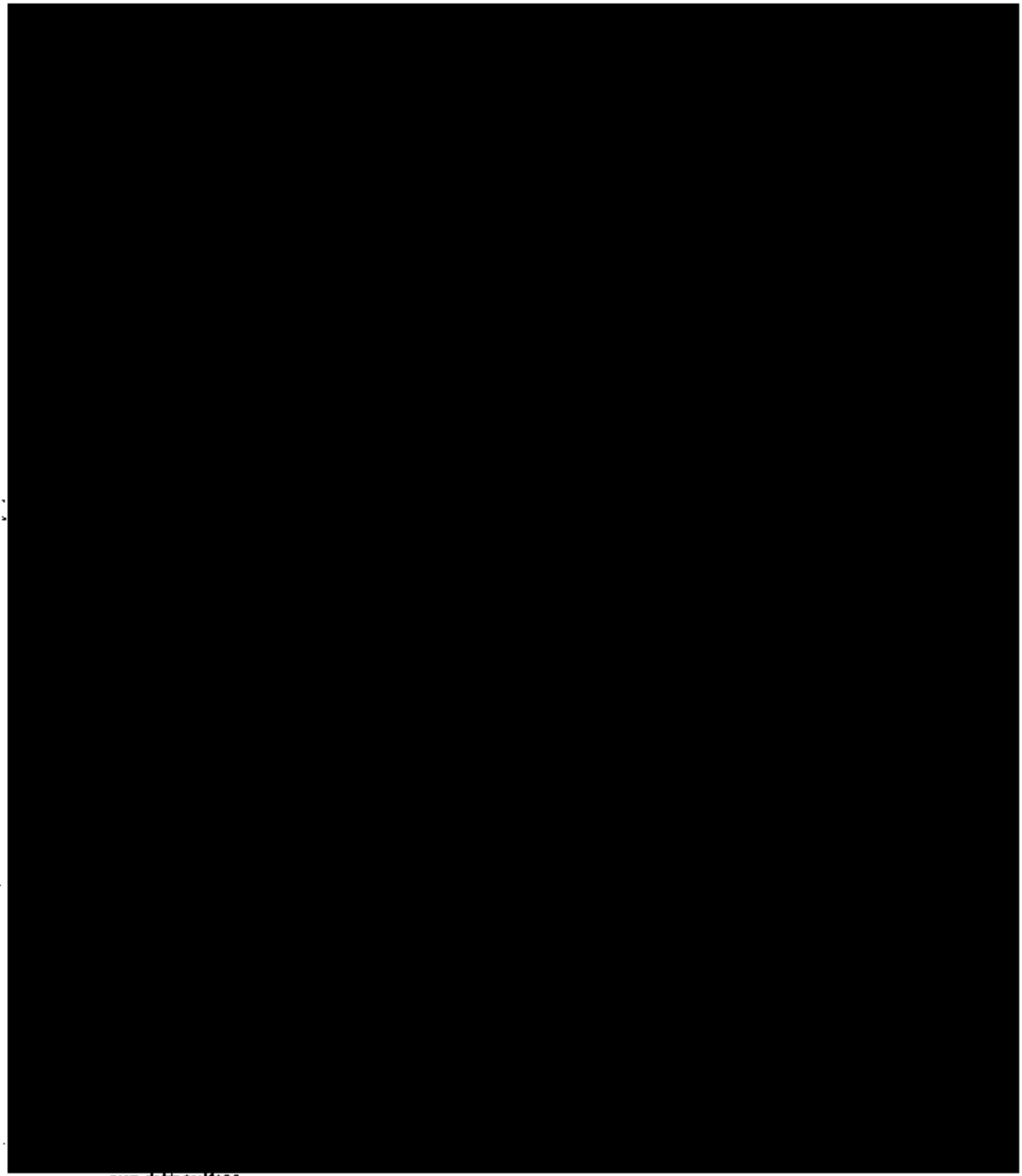












our difficulties.