



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

16-JUL-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

892816

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
1FMZU62E72UA13097		FORD TRUCK	EXPLORER	2002	
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	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type
☐ 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
					Body Style
					☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☒ Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 10130000	Part Name(s) VISUAL SYSTEMS:GLASS:WINDOW:REAR-VIEW BACKLIGHT	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure 3	Date(s) of Failure(s) 15-APR-2001 Mileage at Failure(s) 3000	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 0	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)

LEFT HYDRUALIC SUPPORT BRACKET FOR REAR WINDOW HAS BROKEN OFF THREE TIMES. *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.



U.S. Department
of Transportation
National 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 920

Date Received

01 AUG 13 AM 10:10
16 JUL 2001

OFFICE
EFFECTS INVESTIGATION

Old or
st. dt
old rt
up. tr

Reference No.

892816

OWNER INFORMATION (Type or Print)

702596

Work Number

Home Number

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle?
In the absence of an

☐ YES ☐ NO

Signature of Owner

Name and address to the vehicle manufacturer.

Date 8/5/01

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) (Located at bottom of
windshield on driver's side)

1FMZU6ZE72UA13097

Vehicle Make

FORD TRUCK

Vehicle Model

EXPLORER

Vehicle Year

2002

Current Odometer Reading

Purchase Date

Dealer's Name Carlton Massay

Engine Size
(CID/CC/L)

☐ Turbo
☐ Diesel
☐ Gas
☐ Fuel Injection

☒ New ☐ Used

City Pocomoke State MD Zip Code

No Cylinders 6

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

☒ Sport Ut

☐ Truck

☐ Motorcycle

Body Style

☐ 2-Door

☒ 4-Door

☐ Stationwagon

☐ Pick Up Truck

☒ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component
10130000

Part Name(s)

VISUAL SYSTEMS:GLASS:WINDOW:REAR-VIEW BACKLIGHT

Location

☒ Left

☐ Front

☐ Right

☐ Rear

Failed Part(s)

☒ Original

☐ Replacement

No of Failures

3

Date(s) of Failure(s) 15-APR-2001

Mileage at Failure(s) 3000

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

0

Number of Fatalities

0

Estimated Property Damage

Reported to Police

☐ Yes

☒ No

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

LEFT HYDRUALIC SUPPORT BRACKET FOR REAR WINDOW HAS BROKEN OFF THREE TIMES.

*AK

CONTINUE ON BACK IF NEEDED

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