



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 231

Date Received

14-AUG-2001

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

894241

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 FORD TRUCK	Vehicle Model EXPEDITION	Vehicle Year 2002	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 ☐ 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 13561005	Part Name(s) STRUCTURE:HATCHBACK WINDOWS AND ATTACHMENTS	Location ☐ Left ☐ Right ☐ Front ☐ Rear	Failed Part(s) ☐ Original ☐ Replacement
No of Failure	Date(s) of Failure(s) _____ 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)

WHILE OPENING REAR WINDOW, AND WITHOUT ANY INDICATION WINDOW POPPED OFF HINGE AND SHATTERED. DEALER HAS BEEN CONTACTED. PLEASE PROVIDE FURTHER INFORMAITON. *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) NATIONWIDE 1-888-DASH-2-DOT 1-888-327-4238 www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 231 Date Received: 01 SEP 18 AM 11:29 14-AUG-2001 OFFICE DEFECTS INVESTIGATION Reference No. 894241 Work Number _____ Home Number _____	
OWNER INFORMATION (Type or Print) [Redacted] 7680		Do you authorize NHTSA to contact the manufacturer of your vehicle? In the absence of an authorized representative, please provide the name and address to the vehicle manufacturer. ☒ YES ☐ NO Signature of Owner: [Redacted] Date 9/4/01	
VEHICLE INFORMATION			
Vehicle Ident. No. (VIN) [Located on vehicle or windshield on drivers side] 1FMZU73E32ZA35315		Vehicle Make FORD TRUCK Vehicle Model EXPLORER EXPEDITION Vehicle Year 2002 Current Odometer Reading 650	
Purchase Date 6-27-01 ☐ New ☒ Used		Dealer's Name MANTILIA FORD City WEST HAVEN State CT Zip Code 06516 Engine Size ICID/CC/L 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		Body Style ☒ Sport Ult ☐ Truck ☐ Motorcycle ☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up ☐ Truck	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 13561005 Part Name(s) STRUCTURE:HATCHBACK WINDOWS AND ATTACHMENTS		Location ☐ Left ☐ Right ☐ Front ☐ Rear Failed Part(s) ☒ Original ☐ Replacement	
No of Failures _____ Date(s) of Failure(s) 7-19-01 Mileage at Failure(s) 450 Vehicle Speed at Failure(s) 0		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 1 Number of Fatalities 0 Estimated Property Damage _____ Reported to Police ☐ Yes ☒ No	
NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES) WHILE OPENING REAR WINDOW, AND WITHOUT ANY INDICATION WINDOW POPPED OFF HINGE AND SHATTERED. DEALER HAS BEEN CONTACTED. PLEASE PROVIDE FURTHER INFORMATION. *AK LEFT HAND HINGE (P/N LH1005) APPEARED TO BE MISSING THREADS TO ENGAGE WITH BOLT FOR MOUNTING REAR WINDOW ASSEMBLY TO VEHICLE.			
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.			