



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

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236) **2003 MAY -7 PM 12:29**
INTERNET www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 1366

Date Received

Repository

Reference No.
10016106

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: MILWAUKEE State: WI Zip Code: [REDACTED]

Daytime Telephone Number

E-mail Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
To the absence of an address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: / /

VEHICLE INFORMATION

Make FORD		Model TAURUS		Model Year 1996	
Date Purchased		Dealer's Name and Telephone Number		Engine: No: Cylinders	
Original Owner <input type="checkbox"/>		Dealer's City		State Zip Code	
Transmission Type <input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control		Powertrain		Vehicle Component Code 060000 ENGINE AND ENGINE COOLING	
Multiple Failure:					

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 15-APR-2003	Failure Mileage	Failure Speed
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTM15ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
Tire Component Code		Tire Failure Type

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N
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Narrative Description of Incident(s), Crash(es), and Injury(ies).
Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure;
i.e., parts repaired or replaced (and if old part is available).

WHILE DRIVING AT ANY SPEED THE ENGINE LIGHT CAME STAYED ON THE REMAINDER OF THE TIME THE VEHICLE WAS BEING OPERATED. THE DEALER WAS NOTIFIED. *NLM

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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.