



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)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 252

Date Received

19-MAY-2003 2003 JUN 28 PM 1:40

Repository

Reference No.

0020127

OWNER INFORMATION (Type or Print)

Name

Address

City

AVOCA

State

PA

Zip Code

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
In the absence of _____ name or address to the vehicle manufacturer.
Signature of Owner _____ Date 6/16/03

VEHICLE INFORMATION

If type varies in classification, please attach a photograph of vehicle on driver's side

PLEASE FILL IN

2FTEF14N8NA70236

Make

FORD

Model

F-SERIES

Model Year

1988

Date Purchased

8/91

Dealer's Name and Telephone Number

BARBER FORD 510-602-0229

Engine:

No: Cylinders

8

Fuel Type:

GAS

Original Owner

Dealer's City

EXETER

State

PA

Zip Code

Transmission Type

A

Antilock Brakes

Cruise Control

Powertrain

4X4

Vehicle Component Code

151000 SEAT BELTS:FRONT

Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)

19-MAY-2003

Failure Mileage

95,000

Failure Speed

65

DRIVER SIDE SEAT BELT

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make

Tire Model (Name or Number)

Tire Size (Example P215/85R15)

DOT No. (Example: DOTM19ABC036)

Original Equipment
 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 fatality.)

Crash

Yes No

Fire

Yes No

Number of Persons Injured

Number of Deaths

Reported to Police

N

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).

THE DRIVER SIDE SEAT BELT BECAME UNLATCHED WHILE DRIVING ON THE HIGHWAY. *NLM

HAS NOT WORKED SINCE ORIGINAL FAILURE

(over)

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

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.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I PHONED FORD (CUSTOMER SERVICE) TO INQUIRE AS TO WARRANTY ON SEAT BELT - WAS TOLD IT'S ONLY WARRANTED FOR 5 YEARS. THIS SEEMS TO CONTRADICT THE INFORMATION ON YOUR PAGE RELATING TO FILING A COMPLAINT.

ATTN:

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

BUSINESS REPLY MAIL

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POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.

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National Highway Traffic Safety Administration
DOT Auto Safety Hotline, NSA-10.1
400 7th Street, SW
Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DASH2DOT

and dial toll free at

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1-888-327-4236

DOT Auto Safety Hotline (DASH) 2 DOT



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