



US Department of Transportation  
National Highway Traffic Safety Administration

# DOT Auto Safety Hotline Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS  
1-888-DASH-8-DOT  
(1-888-327-4336)  
INTERNET: www.nhtsa.dot.gov/hotline

### FOR AGENCY USE ONLY

Date Received

Od\_or \_\_\_\_\_  
r\_LB \_\_\_\_\_  
od\_RT \_\_\_\_\_  
up\_Dr \_\_\_\_\_

2003 JUN 17 11 08:16

Reference No.

10024183

### OWNER INFORMATION (Type or Print)

Name: [Redacted]  
Street: [Redacted] Apt. No. [Redacted]  
City: Council Bluffs State: IA

Daytime Telephone Number: [Redacted]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner: [Redacted]

Date: 6/11/03

### PRODUCT INFORMATION

Vehicle Identification No. (VIN) (17 digits)	(Located at bottom of windshield on driver's side)	Make	Model	Year
<u>2FAFP71W13K139874</u>		<u>Ford</u>	<u>Crown Vic</u>	<u>2003</u>
Purchased Date	Dealer's Name	Engine Size (CID/CCL)	<input type="checkbox"/> Turbo	<input type="checkbox"/> Diesel
<u>9-10-02</u>	<u>McMullen Ford</u>	<u>4.6L</u>	<input type="checkbox"/> Turbo	<input type="checkbox"/> Diesel
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City	State	Zip Code	No. Cylinders
<input type="checkbox"/> New <input type="checkbox"/> Used	<u>Council Bluffs</u>	<u>IA</u>		<input type="checkbox"/> Fuel Injection
Manufacture Date (on driver's door or pillar)	Transmission Type	Restraint System	Cruise Control	Driver's Air
	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Overhead Air Bag <input type="checkbox"/> Side-impact <input checked="" type="checkbox"/> Side-impact Air Bag <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> 5-Point Belt	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
				Vehicle Type
				<input type="checkbox"/> Car <input type="checkbox"/> Sport Utility <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other
				Body Style
				<input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other

### FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s)	Location	Failed Part(s)	Handicap Adaptive Equip
<u>Rim (Tire)</u>	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Brand	Tire Name		
Complete Tire Size	DOT No.		
No. of Failures	Copy(s) of Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
	Mileage at Failure(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Vehicle Speed at Failure(s)		

### APPLICABLE INCIDENT INFORMATION

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

Crash	Fire	Number of Persons Injured	Number of Fatalities	Reported to Manufacturer
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>0</u>	<u>0</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

The City of Council Bluffs has six (6) new Ford Crown Vic's. Police investigators and has had several times occur on 3 different vehicles a total of 6 times crashed. Crash occurs on inner side of rim along wheel. Ford at this time gave you a letter of acknowledgement of this problem. (Ford has no solution) This is a defendant safety concern for our police officers

The Privacy Act of 1974 - Public Law 93-502 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your responses, or a statistical summary thereof, may be used in support of the agency's action.