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 1367

Date Received: 25-JUL-2003 2003 AUG 22 AM 9:16

Repository ☐

Reference No.: 10030186

OWNER INFORMATION (Type or Print)

Name: [redacted]
Address: [redacted]
City: APPLETON | State: WI | Zip Code: [redacted]

Daytime Telephone Number: [redacted]
Evening Telephone Number:
E-mail Address:

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? ☐ YES ☒ NO
In the absence of an[redacted]ovide your name or address to the vehicle manufacturer.
Signature of Owner [redacted] Date 7/6/03

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side	Make	Model	Model Year
1FALP52U6VG131587	FORD	TAURUS	1997

Date Purchased	Dealer's Name and Telephone Number			Engine: No. Cylinders	Fuel Type:
Original Owner ☐	Dealer's City	State	Zip Code		

Transmission Type | ☐ Antilock Brakes ☐ Cruise Control | Powertrain

Vehicle Component Code: 110000 ELECTRICAL SYSTEM
Multiple Failure: 5

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)	Failure Mileage	Failure Speed	
	90000		

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: DOTMALSABC036)	☐ 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), Condition, and injury (ies).)

Crash	Fire	Number of Persons Injured	Number of Deaths	Reported to Police
☐ Yes ☒ No	☐ Yes ☒ No			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).

DIRECTIONAL FUSES ARE CONTINUOUSLY BLOWING OUT AND NEED TO BE REPLACED. THIS WAS CAUSED BY A FAILURE IN THE ELECTRICAL SYSTEM.*AK

Include, If available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

AUG 6, 2003 COMPLAINT CAUSE AND CORRECTION MEENAH FORD PORT 5234 3651

JOB#: 1 OPERATION: 51F0Z DESCRIPTION: BODY ELECTRICAL

1. COMPLAINT : GUEST STATES TURN SIGNALS ,FLASHERS INOP
WHEN PUTTING IN FUSE IT BLOWS.

2. CAUSE : FOUND BOTH FUSES PULLED AND FLASHER DIS-CONNECTED.

3. CORRECTION: REPLACED FUSES,INSTALLED FLASHERS,CHECKED ALL WIRES
ALL TEST GOOD.

(E=ENTER) (M#=MORE LINES)

APPLETON POLICE DEPT.
222 S. WALNUT STREET
APPLETON, WI 54911-5899

CITIZEN CONTACT REPORT

DISTRICT: 2
INCIDENT NO. 03-0010-729
JUVENILE ☐ YES
OFFENSE REPORT YES (NO)

NAME - FIRST / M.I. / LAST: [redacted]
PHONE: [redacted]
ADDRESS: [redacted]
CITY, STATE, ZIP: Appleton, WI [redacted]
BIRTH DATE: [redacted]
M ☒ F ☐
WHI. ☒ BLK. 2☐ NAT. AM. 3☐ ASN. 4☐ HISP. 5☐ NON HISP. 6☐
HEIGHT: 6'07
WEIGHT: 220
HAIR: Blo
EYES: Blu

VEH. PLATE: [redacted]
EXP.: 03
STATE: WI
MAKE: Ford
YEAR: 97
MODEL: Tau
COLOR: GRN

[redacted]
STATE: WI
EXP.: 06
LOCATION OF OFFENSE: 800 W. Northland

DATE OF OFFENSE: 01-02-03
TIME: 1925
OFFICER SIGNATURE: [signature]
OFFICER NO. 9201

EXPLAIN VIOLATION/DEFECT/CIRCUMSTANCES
Def. Tail Lights / Turn Signals.

PARENT OR GUARDIAN NAME
SCHOOL
GRADE

SIGNATURE OF PERSON RECEIVING NOTICE
[redacted]

I CERTIFY THAT THE ABOVE VIOLATION(S) HAVE BEEN CORRECTED:
SIGNATURE CERTIFICATION DATE

TYPE OF CONTACT
- ☐ 1 WARNING: City Ordinance Violation. Failure to correct or comply can result in legal action being commenced against you.
- ☐ 2 WARNING: Vehicle Traffic Law Violation. You have violated a traffic law that is described in the narrative section of this notice.
- ☒ 3 VEHICLE DEFECT: The violation(s) indicated must be corrected at once. ALL FUTURE OPERATIONS WITHOUT CORRECTION ARE ILLEGAL. Within 15 days sign this notice and mail or bring it to the Appleton Police Department, unless you are instructed to report in person. FAILURE TO COMPLY CAN RESULT IN ARREST ACTION AGAINST YOU.
- ☐ 4 BICYCLE VIOLATION
- ☐ 5 FIELD INTERROGATION
- ☐ 6 REPORT IN PERSON: Report to the Appleton Police Department
- ☐ 7 Other Contact

DEPARTMENT COPY

APD FORM 130

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THE ATTACHMENTS TO THIS DOCUMENT HAVE BEEN REMOVED TO PROTECT UNWARRANTED INVASION OF PERSONAL PRIVACY PURSUANT TO EXEMPTION 6 OF THE FREEDOM OF INFORMATION ACT (FOIA), 5 U.S.C. 552(b)(6).