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

# Auto Safety Hotline *Rentor's* Vehicle Owner's Questionnaire

NATIONWIDE 1-800-424-8383  
DC METRO AREA (202) 368-0123  
INTERNET: <http://www.nhtsa.dot.gov>

Use *2003* No. 2 pencil or a blue or black ink pen only.  
CORRECT MARK: ●

Date Received: *Jul-03*  
Reference No.: *100 31526*

## OWNER INFORMATION (Type or Print)

DAYTIME TELEPHONE NUMBER

STREET NO. *Arlington County VA* APT. NO. \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_  
ENTER ZIP CODE \_\_\_\_\_

ZIP CODE - 4 \_\_\_\_\_ AREA CODE \_\_\_\_\_

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 and address to the vehicle manufacturer.

DATE: *18 Jul 03*

## VEHICLE INFORMATION

VEHICLE IDENT. NO. (VIN) <i>2FAFP74W831A2592</i>	VEHICLE MAKE <i>Ford</i>	VEHICLE MODEL <i>Crown Vct.</i>	MANUFACTURE DATE	MODEL YEAR <i>2003</i>
VEHICLE MANUFACTURER <i>Ford</i>	<input type="radio"/> BMW <input checked="" type="radio"/> Ford <input type="radio"/> Honda <input type="radio"/> Nissan <input type="radio"/> Subaru <input type="radio"/> Volvo <input type="radio"/> Other	<input type="radio"/> Daihatsu/Chrysler <input type="radio"/> General Motors <input type="radio"/> Hyundai <input type="radio"/> Isuzu <input type="radio"/> Toyota <input type="radio"/> VW		<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
PURCHASE DATE <input type="radio"/> New <input checked="" type="radio"/> Used	DEALER'S NAME <i>See Nex Page</i>	CITY _____	STATE _____	ZIP CODE _____
ENGINE SIZE (CID/CC/L) _____ NO. CYLINDERS _____	FUEL SYSTEM <input checked="" type="radio"/> Carburetor <input type="radio"/> Turbo <input type="radio"/> Fuel Injection	FUEL TYPE <input type="radio"/> Diesel <input checked="" type="radio"/> Gas	TRANSMISSION TYPE <input type="radio"/> Manual <input checked="" type="radio"/> Automatic	ANTI-LOCK BRAKES <input checked="" type="radio"/> Yes <input type="radio"/> No
DRIVETRAIN <input type="radio"/> Front <input type="radio"/> 4-Wheel <input checked="" type="radio"/> Rear	VEHICLE TYPE <input checked="" type="radio"/> Car <input type="radio"/> Minivan <input type="radio"/> Truck <input type="radio"/> Other _____ <input type="radio"/> Van <input type="radio"/> Sport Utility <input type="radio"/> Motorcycle	RESTRAINT SYSTEM <input type="radio"/> Driver Side Airbag <input type="radio"/> 2-Point Belt <input type="radio"/> Passenger Side Airbag <input type="radio"/> Motorbelt <input type="radio"/> 3-Point Belt	CRUISE CONTROL <input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9
	DOORS <input type="radio"/> 2-Door <input checked="" type="radio"/> 4-Door	BODY STYLE <input type="radio"/> Hatchback <input checked="" type="radio"/> Sedan <input type="radio"/> Pick Up Truck <input type="radio"/> Stationwagon		<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9

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

COMPONENT <input type="radio"/> Child Seat <input type="radio"/> Electrical Lights & Alarms <input type="radio"/> Engine & Cooling System <input type="radio"/> Equipment <input type="radio"/> Fuel System, Exhaust <input type="radio"/> Heater, Defrost, Ventilation <input type="radio"/> Interior <input type="radio"/> Parking Brake <input type="radio"/> Power Train <input type="radio"/> Service Brakes <input type="radio"/> Steering <input type="radio"/> Structure <input type="radio"/> Suspension <input type="radio"/> Visual Systems <input checked="" type="radio"/> Other <i>Crash Control</i>	NO. OF FAILURES <i>1</i>	To report defective or failed tires provide the following: Tire Brand, Tire Name, Tire Size (include all number and letters).		
	INCIDENT DATE	TIRE NAME	COMPLETE TIRE SIZE	
	MILEAGE AT INCIDENT <i>Less than 9,000 mi</i>	TIRE BRAND <input type="radio"/> BF Goodrich <input type="radio"/> Cooper <input type="radio"/> Firestone <input type="radio"/> Goodyear <input type="radio"/> Kelly Springfield <input type="radio"/> Michelin <input type="radio"/> Yokohama <input type="radio"/> Other _____		
	VEHICLE SPEED AT INCIDENT <i>65 but it accelerated to 85-90 mph</i>	FAILED PART(S) <input checked="" type="radio"/> Original <input type="radio"/> Replacement		
HANDICAPPED ADAPTIVE <input type="radio"/> Yes <input checked="" type="radio"/> No	FAILED PART(S) AVAILABLE <input type="radio"/> Yes <input checked="" type="radio"/> No	NHTSA PREVIOUSLY CONTACTED? <input type="radio"/> Yes <input checked="" type="radio"/> No		

## APPLICABLE INCIDENT INFORMATION

Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.	CRASH <input type="radio"/> Yes <input checked="" type="radio"/> No	NUMBER OF PERSONS INJURED <i>0</i>	CAUSE OF INCIDENT <input type="radio"/> Wear/Corroded/Rust <input type="radio"/> Weak/Poor Fit/Loose <input type="radio"/> Cut/Torn <input checked="" type="radio"/> Disconnect/Fall Off <input type="radio"/> Erratic/Poor Performance <input type="radio"/> Excessive Effort <input type="radio"/> Noisy <input type="radio"/> Leaks <input type="radio"/> Short <input type="radio"/> Loose/Slacks/Grabs <input type="radio"/> Stability/Vibration <input type="radio"/> Broken	RESULT OF INCIDENT <input type="radio"/> Explosion/Fire <input type="radio"/> Loss of Control <input type="radio"/> Poor Visibility <input type="radio"/> Inadvertent Start <input type="radio"/> Rollover <input type="radio"/> Stalls <input checked="" type="radio"/> Sudden Acceleration
	FIRE <input type="radio"/> Yes <input checked="" type="radio"/> No	NUMBER OF FATALITIES <i>0</i>		

PLEASE DO NOT WRITE IN THIS AREA



09998

Narrative description of incident(s), failure(s), crash(es), location(s), and injury(ies). Include additional accidents if applicable.

Part Number(s) failed 9A896 party Assembly 9A 825 From Ford Industrial Parts sheet 2003A (Ford) 95 Accelerator, Key 4.6 L Speed control production installed engine compartment CPD 2000 Version 15.09 June 2003 (I have the sheet if you want it)

Rental Car from Budget Rental Agreement # 15: LG BAA 9752210 Long Beach Airport (LGB), CA 26 JUN 03 - 6 JUL 03 miles out: 7210 / miles in: 8530

Contributor information, if necessary.

Describe any conditions of incidents. (Include date and mileage)

The Privacy Act of 1974--Public Law 93-579 This information is requested pursuant to the 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.

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HS Form 3000 (Rev. 10/90)

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES



**BUSINESS REPLY MAIL**  
FIRST-CLASS MAIL PERMIT NO. 73178 WASHINGTON, D.C.

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

U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NSA-10.01  
400 7th Street, SW  
Washington, DC 20580

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

400 Seventh St., S.W.  
Washington, D.C. 20580

Official Business  
Penalty for Private Use \$300



# VEHICLE OWNER'S QUESTIONNAIRE (VOQ)

## DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

## DASH 2 DOT

and dial toll free at

# 1-888-DASH-2-DOT

1-888-327-4236

DOT Auto Safety Hotline  
(DASH) 2 DOT



Department of Transportation  
National Highway Traffic Safety Administration

[www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)

C. of. note and return or place in your car manual for future use



## Office of Defects Investigation

## VOQ Confirmation

Your Complaint Information is successfully submitted.

Your Confirmation number (ODI Number) is: 10025798

## Your Complaint Information

## Consumer Information

Name : [REDACTED]  
 Org. Name : [REDACTED]  
 Address : [REDACTED]  
 City, State, Zip : arlington county, VA [REDACTED]  
 USA  
 Daytime Phone : [REDACTED] Ext :  
 Evening Phone : [REDACTED] Fax :  
 Email : [REDACTED]

*Please correct this  
 LGBAA 89 53310*

## Complaint Information

Description : Cruise control failed at almost full throttle while going uphill from Lee Vining CA to Mammoth Lakes CA, on US 395, from about 4,000 to 8,000 ft elevation. Vehicle was a BUDGET RENTAL car, contract 433247, from Long Beach, CA, (LGB) airport location, 2003 FORD Crown Victoria, DEN 28af74wG3x192892, CA LICENSE 5apa510, less than 9,000 miles. Brake & Cruise Control off switch did not remedy throttle position. Stopped car by applying brake & switching off engine on side of road. Did not attempt to switch engine off at high speed as it may, or may not, have locked steering wheel. Fixed problem as a "cable assembly" between "cruise control box" & carburetor had partially come loose, jamming cable on pulley. There seem to be a defect in the fastener for the part reattached allowing recurrence. Budget @ 800 858 5377 would not record problem but told me to report to LGB Budget at turned in. Spoke to service personnel at nearest Ford dealer, Eastern Sierra Motors, Bishop, CA who said there were other rare instances of this happening & that it was an item covered by warranty (phone 877 503 6257). Reported this to Budget agent at LGB who was flippan & rude. He did not seem to care nor did I get the feeling that the item would be fixed. Time of report 0620 hrs/6 JUL 03 (Budget was 20 minutes late opening). Agent reported his name as Jock Rocket (suspect this is not correct). I request that BUDGET be contacted to have the car fixed so it will recur with a less experience driver who may be killed or injured. Also, FORD should be contacted to fix this defect.

Incident Date : 6/30/2003 Fire : No  
 Num. Fatalities : 0 Crash : No  
 Num. Failures : 1 Property Damage : No

# 2003 A (Ford)

95 - Carburetor, Accelerator

8 CYL. 4.6L

Speed control - production installation - engine compartment

