



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: 2003 NOV 25 04:42:40
24-OCT-2003
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OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: LYLE State: WA Zip Code: [REDACTED]
Daytime Telephone Number: [REDACTED] E-mail Address: [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 authorized signature, NHTSA will not provide your name or address to the vehicle manufacturer.
Signature of Owner: [REDACTED] Date: 11 NOV 2003

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side: 2FTRF18W63CA28192
Make: FORD Model: F SUPER DUTY Model Year: 2003
Date Purchased: 23 MAY 03 Dealer's Name and Telephone Number: HOOD RIVER FORD OREGON-1-800-875-7564
Original Owner: Dealer's City: HOOD RIVER State: OREGON Zip Code: 97031
Engine: No. Cylinders: 8 Fuel Type: GASOLINE
Transmission Type: AUTO Antilock Brakes Powertrain Cruise Control
Vehicle Component Code: 135200 VISIBILITY:REARVIEW MIRRORS/DEVICES:EXTERIOR
Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): Failure Mileage: 4000 Failure Speed:

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) 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 injury(ies).)

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 SIDE VIEW MIRRORS PROJECTED ONCOMING VEHICLES FURTHER THAN THEY WERE. AS A RESULT IT ALMOST CAUSED SEVERAL ACCIDENTS. THE DEALERSHIP HAD TO COVER THE MIRROR WITH A STANDARD MIRROR TO CORRECT THE PROBLEM. PLEASE PROVIDE MORE DETAILS. *JB PROBLEM! PASSENGER SIDE MIRROR IS DANGEROUS (OBJECTS IN MIRROR ARE CLOSER THAN THEY APPEAR) THE VEHICLE I SEE IN MIRROR IS DISTANT SMALL - I TRIED MOVING INTO ~~LEFT~~ RIGHT LANE AT THAT TIME VEHICLE WAS STARTING TO PASS IF I HAD MOVED INTO RIGHT LANE AN ACCIDENT WOULD HAVE OCCURED. THIS HAPPENED TWICE

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

The Privacy Act of 1974 - Public Law 93-598 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.

DEALER DID NOT STANDARD MIRROR - I PAID A GLASS CO TO COVER THE MIRROR WITH A STANDARD MIRROR

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

I thank you for your prompt reply and consideration.

ATTACH ADDITIONAL SHEETS IF NECESSARY

US 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

FIRST CLASS PERMIT NO 73173 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, NVS-216
400 7th Street, SW
Washington, DC 20590



VEHICLE OWNER'S QUESTIONNAIRE



DOT AUTO SAFETY HOTLINE

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COMPLETE THIS FORM
OR

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and dial toll free at

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(DASH) 2 DOT



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