



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 100218

Date Received

Repository

2004 MAY 20 10:50

Reference No.
10073895

OWNER INFORMATION (Type or Print)

Name

Daytime Telephone Number

E-mail Address

Address

City LUTZ

State FL

Zip Code

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 a signature, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 5/10/04

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side

Make

Model

Model Year

2FAFP94W5YX

FORD

CROWN VICTORIA

2000

Date Purchased

Dealer's Name and Telephone Number

Engine:

Fuel Type:

10/11/02

GULVIEW MOTORS 993245 Hwy 19 - 727-345-7200

No. Cylinders 8

REG. UNLEADED

Original Owner

Dealer's City

State

Zip Code

DAVID

PERT AICHEY

FL

33608

Transmission Type

Antilock Brakes

Powertrain

Vehicle Component Code

AUTOMATIC

Cruise Control

181000 VEHICLE SPEED CONTROL: ACCELERATOR PEDAL

Multiple Failure: 1

FAILED COMPONENT(S) PART(S) INFORMATION

Incident Date(s)

Failure Mileage

Failure Speed

STEER WHEEL MALFUNCTIONED NO WARNING - 2 WHEELS CAME TO MY RESCUE. SAID THEY NEVER SEEN A STEERING WHEEL TURNING AROUND TURNS OUT OF MY CONTROL.

13-APR-2004
MAY

34,000

0

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 injury(ies).)

Crash

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

Yes No

Yes No

1

0

Y

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).

WHILE APPLYING THE ACCELERATOR PEDAL VEHICLE SUDDENLY ACCELERATED. CONSUMER WAS NOT ABLE TO MAINTAIN CONTROL OF THE VEHICLE, AND CRASHED INTO A TREE. DRIVER SUSTAINED FIRST DEGREE BURNS, AND WAS TAKEN TO A HOSPITAL. BOTH AIRBAGS DEPLOYED. VEHICLE WAS TOWED TO A DEALER FOR INSPECTION. BUT DEALER WAS UNABLE TO DETERMINE THE CAUSE OF THE PROBLEM.

*AK

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

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)

ON A CLEAR DAY ON 5/13/01 I LEFT MY HOME AT CANTON ARIZONA IN MY 2001 FORD ESCAPE APPROXIMATELY 1 MILE TO THE END OF COMPLEX WHERE THE LIGHTS ON VANDYKE RD. GOING EAST. THE LIGHT TURNED GREEN AND NO ONE WAS IN FRONT OF ME. WITHOUT ANY WARNING AT ALL NO SIGNS OF ANY PROBLEM WITH CAR PERIOD. AS I ACCELERATED LIGHTLY, JUST ENOUGH GAS TO MAKE A TURN WHICH I NEVER COMPLETED WHEN MY STEERING WHEEL MALFUNCTIONED - WITH IN A SPLIT SECOND WHICH I COULD NOT CONTROL MY STEERING WHEEL ENGAGED IN SPINNING 2017. 2 WITNESSES SAID THEY HAVE NEVER SEEN ANYTHING LIKE IT. THEY BOTH CAME TO MY RESCUE AND ALSO SAID I TRIED SO HARD TO CONTROL THE CAR FOR MY LIFE. I COULD HAVE BEEN KILLED OR KILLED A PERSON WALKING ON THAT SIDE OF ROAD FOR THERE IS A CIRCLE K CONVENIENT STORE SEVERAL FEET AWAY FROM WHERE I CRASHED. I THOUGHT I WAS GOING TO DIE IN A FIRE WHEN I SPENT BURNT - THANK GOD I RELEASED MY SEAT BELT AND I WALKED AWAY UNHARMED.

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



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DASH2DOT and dial toll free at

TO REPORT VEHICLE SAFETY DEFECTS COMPLETE THIS FORM OR

DOT AUTO SAFETY HOTLINE

VEHICLE OWNER'S QUESTIONNAIRE



