



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

FOR AGENCY USE ONLY 100216

Date Received: 24-JAN-2005  
Repository:  IN 3-32  
Reference No.: 10198761

**OWNER INFORMATION (Type or Print)**

Name: [Redacted]  
Address: [Redacted]  
City: TORRINGTON State: CT Zip Code: [Redacted]

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

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

Signature of Owner: \_\_\_\_\_ Date: 1 / 1

**VEHICLE INFORMATION**

17 dot Vehicle Identification Number Located at bottom of windshield on driver's side: 1FTNX21F5[Redacted]  
Make: FORD Model: F250 Model Year: 2000  
Date Purchased: JUNE 2000 Dealer's Name and Telephone Number: TORRINGTON FORD 860 489 4135  
Engine: No. Cylinders: 8 Fuel Type: DIESEL  
Original Owner:  Dealer's City: TORRINGTON State: CT Zip Code: 06770  
Transmission Type: AUTOMATIC  Antilock Brakes  Cruise Control  
Powertrain: \_\_\_\_\_ Vehicle Component Code: 060000 ENGINE AND ENGINE COOLING  
Multiple Failure: 1

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

Incident Date(s): 20-JAN-2005 Failure Mileage: 68,000 Failure Speed: \_\_\_\_\_  
Failure Description: CAM POSITIONING SENSOR

**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: 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:  Yes  No Fire:  Yes  No  
Number of Persons Injured: 0 Number of Deaths: 0 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).

WHILE TURNING RIGHT, THE VEHICLE STALLED WITHOUT WARNING. THE DRIVER TRIED TO RESTART THE VEHICLE AND WAS ABLE TO DO SO. THE VEHICLE WAS TAKEN TO THE DEALER FOR INSPECTION. THE MECHANIC INFORMED THE DRIVER THAT THE CAMSHAFT POSITION SENSOR NEEDED TO BE REPLACED. PLEASE PROVIDE FURTHER DETAILS. \*JB

*While making a right hand turn, the truck died without warning. Without power steering and brakes, the truck went into the construction area before I was able to muscle it back to the right hand lane. It would not start immediately, after several minutes the truck did start and I was able to drive it to a dealer.*

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.

# VEHICLE OWNER'S QUESTIONNAIRE

DOT AUTO SAFETY HOTLINE

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM

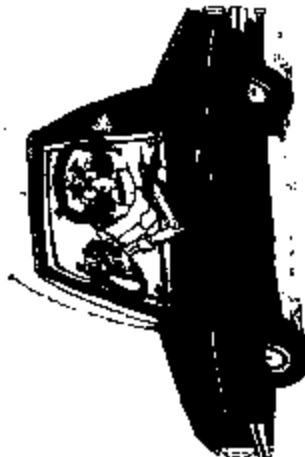
OR

**DASH2DOT**

and dial toll free at

**1-888-DASH-2-DOT**  
**1-888-327-4236**

DOT Auto Safety Hotline  
(DASH) 2 DOT



U.S. Department of Transportation  
National Highway Traffic Safety  
Administration  
[www.nhtsa.dot.gov/hotline](http://www.nhtsa.dot.gov/hotline)



U.S. Department of Transportation  
National Highway Traffic Safety Administration  
Office of Defects Investigation, NVS-218  
400 7th Street, SW  
Washington, DC 20590

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

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73172 WASHINGTON, D.C.



U.S. 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

ATTACH ADDITIONAL SHEETS IF NECESSARY

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