



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 100182

Date Received

28-MAR-2005

Repository ☐

Reference No.: 29
10116712

OWNER INFORMATION (Type or Print)

Name

Address

City ARCADE

State NY

Zip Code

Daytime Telephone Number

Fax/Cell Address

Evening Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?
In the absence of an auth _____ our name or address to the vehicle manufacturer.
Signature of Owner _____ Date 4/2/05

VEHICLE INFORMATION

17 digit Vehicle Identification Number located at bottom of windshield on driver's side
2FTRX18L8YC

Make
FORD

Model
F150

Model Year
2000

Date Purchased

Dealer's Name and Telephone Number

Engine:
No. Cylinders:

Fuel Type:
Gas

Original Owner
☒

Dealer's City

State

Zip Code

Transmission Type
AUTOMATIC

☒ Antilock Brakes
☒ Cruise Control

Powertrain
4 WHEEL DRIVE

Vehicle Component Code
017500 STEERING:LINKAGES:TIE ROD ASSEMBLY

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
05-12-2004
24 Nov 2003

Failure Mileage
38000

Failure Speed
10

1st Incident outer tie rod end
2nd Incident inner tie rod end

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: DOTM19ABC086)

☐ 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)).

WHILE DRIVING AT APPROXIMATELY 10 MPH THE TIE ROD SNAPPED OFF THE CONTROL ARM, CAUSING THE VEHICLE TO LOSE STEERING CONTROL. OWNER CONTACTED THE MANUFACTURER, WHO WAS AWARE OF THIS DEFECT, AND SUGGESTED THAT THE OWNER HAS THIS PROBLEM CHECKED OFTEN. *AK

2ND Incident... 50,000 miles 12 Dec 2004

The incident description is the same as above, except
The 2nd time a different tie rod end broke —
other side

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.