


DOT Auto Safety Hotline Vehicle Owner's Questionnaire TO REPORT VEHICLE SAFETY DEFECT 1-888-DASH-2-DOT (1-888-327-4238) INTERNET: www.nhtsa.dot.gov				FOR AGENCY USE ONLY	
 U.S. Department of Transportation National Highway Traffic Safety Administration				Date Received 2005 MAR 20 11:07:50	
Name _____ Title _____ City <u>CANISTEO</u> State <u>NY</u> Zip Code _____				Reference No. 10117314	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.				Signature of Owner _____ Date <u>3/17/05</u>	
PRODUCT INFORMATION					
Vehicle Ident. No. (VIN) (17 digits) <u>1F0R-F57F02E</u>		Make <u>FORD</u>		Model <u>F550</u>	
Purchased Date <u>4-5-02</u>		Dealer's Name <u>SATELLITE INDUSTRIES</u>		Engine Size (CID/CCL) <u>7.3</u>	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Used		Dealer's City <u>MINNEAPOLIS</u>		No. Cylinders <u>8</u>	
Manufacture Date (on driver's door or pillar) <u>01-02</u>		Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic		Restraint System <input checked="" type="checkbox"/> Air Bag <input checked="" type="checkbox"/> Seat Belt <input type="checkbox"/> Child Seat	
		<input type="checkbox"/> Motor Oil <input type="checkbox"/> 2-Stroke Oil		<input type="checkbox"/> Turbo Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	
		<input type="checkbox"/> Diesel <input checked="" type="checkbox"/> 4-Wheel			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Part Number(s) <u>TO MANY TO LIST</u>			Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear		Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Brand _____		Tire Name _____		Describe Tire Size _____	
No. of Failures _____		Date(s) of Failure(s) <u>4-05-02 TO PRE</u>		Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mileage at Failure(s) <u>60 - 75 DATE</u>		Vehicle Speed at Failure(s) <u>0-65 MPH</u>		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
APPLICABLE INCIDENT INFORMATION					
(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies). Attach photos if available.)					
Crash <input type="checkbox"/> Yes <input type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input type="checkbox"/> No		Number of Fatalities _____	
		Number of Persons Injured _____		Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). <u>PROBLEMS BEGAN APRIL 5 2002 PURCHASE DATE (VIBRATION)</u> <u>OTHER PROBLEMS - OIL LEAKS - OIL CONSUMPTION - ELECTRICAL SHORTS</u> <u>BRAKES - WHEELS FALL OFF - STEERING</u> <u>TRUCK IS NOT SAFE TO DRIVE BECAUSE OF VIBRATION -</u> <u>FORD WILL NOT REPAIR</u> <u>TRUCK IS CURRENTLY IN LAWSUIT</u> <u>WE HAVE HUNDREDS OF PAGE OF DOCUMENTATION AND PHOTOS</u> <u>TO MANY TO SEND</u>					
This Privacy Act of 1974 - Public Law 93-502 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)

CONTACTS - ~~MAT~~ ATTORNEY - BRIAN SCHU 2220 MAIN ST  
HORWELL - NY 14843 (607) 324-5711

FORDS ATTORNEY BOBIS - RUSSELL & PETERSON  
320 S. LIVINGSTON AVE  
LIVINGSTON NJ 07039  
ATTN JAMES RUBIS

I HAVE BEEN TRYING TO SOLVE PROBLEMS FOR THREE YEARS  
THIS TRUCK IS NOT SAFE AND ONLY A MATTER  
OF TIME BEFORE SOMEONE GETS HURT.

ATTACH ADDITIONAL SHEETS IF NECESSARY

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

**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  
DOT Auto Safety Hotline, NSA-10.1  
400 7th Street, SW  
Washington, DC 20590



**VEHICLE  
OWNER'S  
QUESTIONNAIRE  
(VQO)**



**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



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National Highway Traffic Safety  
Administration  
<http://www.dot.gov/ncqs>