



Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS
888-327-4236
www.safercar.gov

FOR AGENCY USE ONLY	
Date Received 1-3-06	Repository <input type="checkbox"/>
Reference No. 10154102	

OWNER INFORMATION (Type or Print)			
Name	Street No.	City	State
		Ontario	OR
Model Telephone Number	Dealer Telephone Number	E-mail	
		N/A	

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
 In the absence of authorization, recall performance on your vehicle is available to the manufacturer only during a defect investigation or when you make a complaint about recall performance on your vehicle.

Signature of Owner _____ Date **4/15/06**

VEHICLE INFORMATION				
17 digit Vehicle Identification number located at bottom of windshield on driver's side 1FTZR45E	Make FORD	Model Ranger	Year 03	Current Mileage 6000
Date Purchased 2003	Dealer's Name and Telephone Number Lithia Ford # ?	Engine: V-6	Fuel Type: <input type="checkbox"/> Diesel <input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Original Owner	Dealer's City Roseburg	State OR	Zip Code 97470	No. Cylinders 6
Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain <input type="checkbox"/> All-Wheel Drive <input type="checkbox"/> Rear-Wheel Drive <input type="checkbox"/> Front-Wheel Drive <input checked="" type="checkbox"/> Four-Wheel Drive		

FAILED COMPONENT(S)/PART(S) INFORMATION				
Component Name Electronic Throttle Control	Incident Date(s) 1/04 4/04	Failure Mileage APPX 6000	Failure Speed under 5mph	Failure Location <input checked="" type="checkbox"/> Driver <input type="checkbox"/> Passenger <input type="checkbox"/> Front <input type="checkbox"/> Rear

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE			
Tire Make/Brand	Tire Model/Line	Tire Name	Tire Size (Example: P215/65R110S)
Failed Structure <input type="checkbox"/> Tread <input type="checkbox"/> Sidewall <input type="checkbox"/> Bead		DOT No. (Example: DOT MAL8ABC036 on sidewall)	
Failure Type: <input type="checkbox"/> Blowout <input type="checkbox"/> Blister <input type="checkbox"/> Crack <input type="checkbox"/> Torn <input type="checkbox"/> Tread Separation <input type="checkbox"/> Road Hazard <input type="checkbox"/> Out of Round		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE			
Make	Date Manufactured	Model Number and Name	
Seat Type <input type="checkbox"/> Infant <input type="checkbox"/> Booster <input type="checkbox"/> Integrated <input type="checkbox"/> Convertible <input type="checkbox"/> Other	Installed in Vehicle using the: <input type="checkbox"/> Vehicle safety belt <input type="checkbox"/> LATCH system* <small>*Vehicle info required</small>		
Failed Part. Describe Failure Below <input type="checkbox"/> Base <input type="checkbox"/> Harness/Buckle <input type="checkbox"/> LATCH Connector <input type="checkbox"/> Shell <input type="checkbox"/> Handle <input type="checkbox"/> Other			

APPLICABLE INCIDENT INFORMATION				
<i>(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies).)</i>				
Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 4	Number of Deaths 0	Police Report No. Douglas County Cir. Ct. # 04CR0814FE Roseburg Ore.

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies). **On 1-3-04 while driving at 55 mph, w/cruise control on, truck began to speed up to nearly 80 mph, before I could get it to stop. Nearly causing a serious wreck. Then on 4-24-04 while sitting at a traffic light waiting for it to turn green, just as I started to turn left from the light, truck's throttle became stuck and revved to nearly 4000 rpm, causing the truck to hit several cars and caused serious physical injuries to 3 other people besides myself. I was unable to prove in criminal court that the truck did this. So, I was convicted of assault with a motor vehicle and I am now doing 70 months in prison, for a crime I didn't commit.**

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If NHTSA proceeds with administration 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)

So, I am hoping by filling out this complaint, that maybe someone who has had similar problems with this specific year and make of Ford F150. That they will contact me at [redacted]

Ontario, Or. [redacted]

Maybe, if enough of us get together, and voice our concerns then maybe FORD will recall this truck, before someone actually die's. As for me, I am still looking for a Attorney who is willing to help me fight for my freedom back. See attached Notarized Release of

ATTACH ADDITIONAL SHEETS IF NECESSARY *Info.*

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
Office of Defects Investigation, NVS-210
400 7th Street, SW
Washington, DC 20590



Think your vehicle has a safety defect?



if so!

Use the enclosed form to file a report.

or visit:

www.safercar.gov

or call:

Vehicle Safety Hotline

888-327-4236



Vehicle Owner's Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration



Release of Information

Attn: Chief Alberto Jimenez "NHTSA" 4-15-06
% Correspondence Research Division
Office of Defects Investigation, Enforcement

I am freely offering this notarized release of information, so that you may include my Full name and address in my complaint, that I'm filing, and requesting that you place on your complaint web site.

If you are still unable to put my personal info. on your web site. Then please allow anyone who may contact the "NHTSA" requesting my information, to have it.

In Closing I'd like to thank you for your help, in this matter. Maybe someone will see my complaint, and be willing to help me fight for my freedom back.

I Charles Long hereby allow the National Highway Traffic Safety Administration to release any and or all personal information, contained in this letter and or complaint, #10154102, to whom ever they want.

Sincerely Yours,

Agrees to x. [Redacted]

Dated x. 6-22-06

Notary Signed and Sworn before me on 22 day of June, 2006



[Signature]
NOTARY public for the State of Oregon

03-02-2009
Commission expires
County of Malheur