



U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

Vehicle Owner's Questionnaire

TO REPORT VEHICLE SAFETY DEFECTS

888-327-4236

www.safercar.gov

FOR AGENCY USE ONLY

Date Received

08-15-06

Repository ☐

Reference No.

10165834

Daytime Telephone Number

Evening Telephone Number

E-mail

Name

Street

Apt. No.

City

State

Zip

Do you authorize NHTSA to use your information in the absence of a recall performance or

manufacturer of your vehicle?

☒ YES ☐ NO

the vehicle manufacturer only during a defect investigation or when you make a complaint about

Signature of Owner

SAFETY DIRECTOR

Date 8/2/06

VEHICLE INFORMATION

17 digit Vehicle Identification number located at bottom of windshield on driver's side

1 F D W E 3 S P S S H

Make

FORD

Model

E-350

Year

05

Current Mileage

24,000

Date Purchased

1/05

Dealer's Name and Telephone Number

NESCO BUS & TRUCK SALES

Engine:

No. Cylinders 8

Fuel Type:

☒ Diesel ☐ Hybrid ☐ Gas ☐ Other

Original Owner

Transmission Type

☐ Manual ☒ Automatic

Dealer's City

BAIRSHORE

State

N.Y.

Zip Code

Powertrain

☐ All-Wheel Drive ☒ Front-Wheel Drive

☒ Rear-Wheel Drive ☐ Four-Wheel Drive

FAILED COMPONENT(S)/PART(S) INFORMATION

Component Name

ENGINE LIGHT ON

Incident Date(s)

Failure Mileage

Failure Speed

Failure Location

☐ Driver ☐ Passenger ☐ Front ☐ Rear

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make/Brand

Tire Model/Line

Tire Name

Tire Size (Example: P215/65R1105)

Failed Structure

☐ Tread ☐ Sidewall ☐ Bead

DOT No. (Example: DOT MAL9ABC036 on sidewall)

☐ Original Equipment ☐ Prior Repair

Failure Type:

☐ Blowout ☐ Blister ☐ Crack ☐ Torn ☐ Tread Separation ☐ Road Hazard ☐ Out of Round

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make

Date Manufactured

Model Number and Name

Seat Type

☐ Infant ☐ Booster ☐ Integrated ☐ Convertible ☐ Other

Installed in Vehicle using the:

☐ Vehicle safety belt ☐ LATCH system*
*Vehicle info required

Failed Part. Describe Failure Below

☐ Base ☐ Harness/Buckle ☐ LATCH Connector ☐ Shell ☐ Handle ☐ Other

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

Police Report No.

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

ENGINE LIGHT ON 2/06

Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to a49 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.

Mail postage free or fax to 202-366-7882