



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 2008 FEB 15
(1-888-327-4236)
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository ☐

2008 FEB 15 PM 12:56
31-JAN-2008

Reference No.
10216569

OWNER INFORMATION (Type or Print)

Name

Address

City BALTIMORE

State MD

Zip Code

Daytime Telephone Number

E-mail Address

Evening Telephone Number

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

Signature of Owner Date / /

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side
2FALP74W1R

Make
FORD

Model
CROWN VICTORIA

Model Year
1994

Date Purchased
06-DEC-05

Dealer's Name and Telephone Number

Engine:
No: Cylinders 8

Fuel Type:
Gas

Original Owner
☐

Dealer's City

State

Zip Code

Transmission Type
AUTOMATIC

☒ Antilock Brakes
☒ Cruise Control

Powertrain
REAR WHEEL DRIVE

Vehicle Component Code
180000 VEHICLE SPEED CONTROL

Multiple Failure: 2

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s)
31-JAN-2008

Failure Mileage
160000

Failure Speed
0

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

Fire

Number of Persons Injured

Number of Deaths

Reported to Police

☐ Yes ☒ No

☐ Yes ☒ No

0

0

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).

TL*THE CONTACT OWNS A 1994 FORD CROWN VICTORIA. THE CONTACT RECEIVED A RECALL NOTICE FOR THE VEHICLE SPEED CONTROL IN AUGUST OF 2007. THE SPEED CONTROL WAS DISCONNECTED AT THAT TIME. THE CONTACT HAS CALLED THE DEALER SEVERAL TIMES TO FIND OUT WHEN THE PARTS WILL BE AVAILABLE FOR THE REPAIR, BUT HAS NOT BEEN GIVEN A DATE WITHIN A REASONABLE AMOUNT OF TIME. THE CONTACT STATED THAT HE SMELLS GAS COMING FROM THE FRONT OF THE VEHICLE. HE ONLY NOTICES THE SMELL WHILE INSIDE THE PASSENGER COMPARTMENT. THE CONTACT HAS NOT TAKEN THE VEHICLE TO THE DEALER FOR INSPECTION. THE RECALL NUMBER WAS UNKNOWN. THE CURRENT AND FAILURE MILEAGES WERE 160,000.

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.

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

1/08
Fumes inside the vehicle caused headaches
stomach aches, dizziness to Driver

28 years of age his Mother

56 years of age and Grandmother

77 years of age all of Baltimore MD

Reside @ Baltimore MD

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9382

Official Business
Penalty for Private Use \$300

BUSINESS REPLY MAIL

FIRST-CLASS MAIL

PERMIT NO. 1888

WASHINGTON, DC

POSTAGE WILL BE PAID BY ADDRESSEE

US Department of Transportation
National Highway Traffic Safety Administration
Office of Defects Investigation, NVS-210
1200 New Jersey Ave SE
Washington, DC 20077-9382

MAILED
IN THE
UNITED STATES



**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 Owners Questionnaire (VOQ)
U.S. Department of Transportation
National Highway Traffic Safety Administration