



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 19 PM 2:07  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received 01-FEB-2008	Repository <input type="checkbox"/>
Reference No. 10216654	

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City VANCEBURG State KY Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]  
Evening Telephone Number [REDACTED]

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 [REDACTED] Date 2/2/08

**VEHICLE INFORMATION**

17 digit Vehicle Identification Number: Located at bottom of windshield, driver's side 2FALP73W1S [REDACTED]	Make FORD	Model CROWN VICTORIA	Model Year 1995
Date Purchased 1995	Dealer's Name and Telephone Number COLE FORD 800-507-2653		Engine: No: Cylinders 8
Original Owner <input checked="" type="checkbox"/>	Dealer's City WINCHESTER	State 00	Zip Code 40391
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain UNKNOWN	Fuel Type: Gas
Vehicle Component Code 180000 VEHICLE SPEED CONTROL		Multiple Failure: 0	

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Incident Date(s) 15-AUG-2007	Failure Mileage	Failure Speed 0	
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**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)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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**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 1995 FORD CROWN VICTORIA. IN AUGUST OF 2007, THE CONTACT RECEIVED A RECALL NOTICE FOR THE VEHICLE SPEED CONTROL. SINCE THAT TIME, SHE HAS BEEN INFORMED EVERY MONTH THEREAFTER THAT THE PARTS WOULD BE AVAILABLE THE FOLLOWING MONTH. IN JANUARY OF 2008, SHE WAS INFORMED THAT THE PARTS WOULD BE AVAILABLE IN FEBRUARY. THERE HAD BEEN NO FAILURE TO DATE. THE PURCHASE DATE, RECALL NUMBER, AND POWERTRAIN WERE UNKNOWN. THE CURRENT MILEAGE WAS 163,000.

*Even tho I havent had trouble yet, they should have the parts to replace. I travel a lot in Spring Summer & Fall - Thanking you kindly - [REDACTED]*

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.

ATTACH ADDITIONAL INFORMATION HERE

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.