



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 (1-888-327-4236)

INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received

Repository

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Reference No.
10222379

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
Address: [REDACTED]
City: OMAHA State: AR Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED]

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: 1FDXE40S2WH [REDACTED]
Make: FORD Model: ECONOLINE Model Year: 1998
Date Purchased: 8-11-88 (16 NOV 06) Dealer's Name and Telephone Number: COURTESY MOTORS Engine: No: Cylinders 6 Fuel Type: Gas
Original Owner: Dealer's City: SPRINGFIELD State: MO Zip Code: _____
Transmission Type: AUTOMATIC Antilock Brakes Cruise Control Powertrain: REAR WHEEL DRIVE Vehicle Component Code: 185000 VEHICLE SPEED CONTROL:CRUISE CONTROL Multiple Failure: 0

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 13-FEB-2008 Failure Mileage: _____ 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: Yes No Fire: Yes No
Number of Persons Injured: 0 Number of Deaths: 0 Reported to Police: 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 1998 FORD ECONOLINE. THE CONTACT RECEIVED A RECALL LETTER FOR NHTSA CAMPAIGN ID NUMBER 08V051000 (VEHICLE SPEED CONTROL:CRUISE CONTROL) IN FEBRUARY OF 2008. THE PARTS ARE STILL UNAVAILABLE. THERE HAD BEEN NO FAILURE TO DATE. THE ENGINE SIZE WAS UNKNOWN. THE CURRENT MILEAGE WAS 48,000.

[REDACTED] 43,000
Hudspeth Ford has disconnected the cruise control and they have no idea when required part will arrive,

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.