



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: 29-SEP-2008
 Repository:
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2008 DEC 16 PM 4:04

OWNER INFORMATION (Type or Print)

Name: _____
 Address: _____
 City: NEW CARLISLE State: IN 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: 9/29/08

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 1FTEF15Y8TL
 Make: FORD Model: F150 Model Year: 1996
 Date Purchased: 6-1-07 Dealer's Name and Telephone Number: _____
 Original Owner: Dealer's City: _____ State: _____ Zip Code: _____
 Engine: No: Cylinders: 6 Fuel Type: GAS
 Transmission Type: Antilock Brakes Cruise Control Powertrain: _____
 MANUAL Vehicle Component Code: 102000 POWER TRAIN:MANUAL TRANSMISSION
 Multiple Failure: _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s): 03-JUL-2008 Failure Mileage: 140000 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 1996 FORD F150. THE CONTACT STATED THAT THE CLUTCH WOULD NOT RELEASE WHEN THE SLAVE CYLINDER DEVELOPED A LEAK. HE PULLED UP TO AN INTERSECTION AND DEPRESSED THE CLUTCH PEDAL, BUT THE VEHICLE CONTINUED TO MOVE. HE KEPT DEPRESSING THE PEDAL, BUT IT WOULD NOT RELEASE; THEREFORE, HE APPLIED THE BRAKES AND TURNED OFF THE ENGINE SIMULTANEOUSLY TO PREVENT A CRASH. THE SAME FAILURE RECURRED THE FOLLOWING DAY SO THE CONTACT STOPPED DRIVING THE VEHICLE. THROUGH ONLINE RESEARCH, HE NOTICED THAT MANY OTHER CONSUMERS EXPERIENCED THE SAME ISSUE. THE MANUFACTURER AND DEALER HAVE NOT BEEN NOTIFIED. THE CURRENT AND FAILURE MILEAGES WERE APPROXIMATELY 140,000.

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)

THE CLUTCH WILL NOT RELEASE WHEN YOU NEED IT TO, IN ORDER TO SAFELY STOP WHEN NEEDED AND REMAIN STOPPED, AND NOT MOVING. (PLEASE CORRECT - AFRAND TO DRIVE - REMAINS PARKED TILL I HEAR FROM YOU. THANK YOU

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

SOUTH BEND IN 465

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HAPPY HOLIDAYS NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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 Avenue SE, Washington, D.C. 20077-9382



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