



NOV 20 2009

DOT Auto Safety Hotline

U.S. Department of Transportation
National Highway Traffic Safety Administration

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 * 05-NOV-2009
Repository
Reference No. 10291068

OWNER INFORMATION (Type or Print)

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

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

The information you provide will be used to identify potential safety-related defects. We may share your information with the applicable vehicle manufacturer during an investigation or recall in accordance with the routine uses described in the agency's Privacy Act notice. See 49 FR 53971 (Sep. 3, 2004).

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side: 3FADP13P61R [REDACTED]
Make: FORD Model: ESCORT Model Year: 2001
Date Purchased: APRIL '02 Dealer's Name and Telephone Number: FORD OUT OF BUSINESS
Original Owner: Dealer's City: LATONIA State: KY Zip Code: 4015
Transmission Type: 1 TIME
 Antilock Brakes Cruise Control Powertrain: Multiple Failure: Incident Date(s): 10-JUL-2009

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 020000 SUSPENSION Failure Mileage: 59000 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: Number of Deaths: 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 2001 FORD ESCORT PURCHASED APRIL 2002. THE REAR COIL SPRINGS, STRUTS, AND EGR VALVE WERE PLACED AT AN EXPENSE OF \$870.00. AFTER THE REPAIR THE FRONT COIL SPRINGS, AND STRUTS FAILED. THE DEALER STATED THAT COIL SPRINGS AND STRUTS SHOULD BE REPAIRED TOGETHER. THEY THEN ADDED THAT THIS FAILURE WAS COMMON FOR HER MODEL TYPE. THE FAILURE AND CURRENT MILEAGES WERE UNDER 59,000.

NO, THEY DID NOT SAY THAT. THEY SAID ITS POSSIBLE THE FRONT SPRINGS + STRUTS COULD BE BAD TOO.

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 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)

TOOK CAR BACK AFTER GETTING BACK COIL SPRINGS,
STRUTS, EGR VALVE FREQ. They told me IT COULD
BE IN THE FRONT NOW. THEY CLEANED MY BRAKES.
DID NOT REPLACE THE FRONT AT THIS TIME. NOT NECESSARY.
TOLD ME THEIR SHOULD BE A RECALL. 1ST TIME THERE
ANOTHER FORD OWNER WAS THERE W/ THE SAME PROBLEM.
2ND TIME I OVERHEARD THEM TALKING TO ANOTHER CUSTOMER
ABOUT SPRINGS + STRUTS - NOT SURE IF THAT VEHICLE WAS
A FORD OR NOT. MECHANIC TOLD ME 1ST TIME THERE WAS ANOTHER
FORD OWNER THERE
W/ SAME PROBLEM.

ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department
of Transportation

National Highway
Traffic Safety
Administration

1200 New Jersey Avenue SE.
Washington, D.C. 20077-9362

Official Business
Penalty for Private Use \$300



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



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