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
SEP 2 RECD SEP 02 2010 24-JUN-2010	☐

Reference No.: 10339856

OWNER INFORMATION (Type or Print)

Name	[redacted]	Daytime Telephone Number	E-mail Address
Address	[redacted]	[redacted]	
City: CLEAR LAKE	State: MN	Zip Code: [redacted]	Evening Telephone Number

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	Make	Model	Model Year
3FRML55Z86V[redacted]	FORD	E550 LCF550	2006

Date Purchased	Dealer's Name and Telephone Number	Engine: No: Cylinders	Fuel Type:
Original Owner ☑	Dealer's City: Buffalo	State: MN Zip Code: 55425	6 P

Transmission Type	Antilock Brakes / Cruise Control	Powertrain	Multiple Failure:	Incident Date(s)
A5SP	☐ / ☐	L	COMPONENT	08-JUL-2006

FAILED COMPONENT(S)/PART(S) INFORMATION

Vehicle Component Code: 103000 POWER TRAIN: AUTOMATIC TRANSMISSION	Failure Mileage	Failure Speed
	300	40

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: DOTMAL9ABC036)	☐ 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			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 2006 FORD LC F-550. THE CONTACT STATED WHEN DRIVING AT ANY SPEED OF AT LEAST 40 MPH, THE VEHICLE WOULD INDEPENDENTLY SHIFT INTO NEUTRAL. THE DEALER PERFORMED A DIAGNOSTIC YET WAS UNABLE TO DUPLICATE OR PRODUCE ANY FAILURE CODES FOR THE VEHICLE. THE FAILURE PERSISTED. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 300 AND THE CURRENT MILEAGE WAS 32,000.

~~I don't know~~ I don't use tow haul because I don't know when it will come out of gear I think there something wrong with the computer.

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY