 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 18-OCT-2010	Repository <input type="checkbox"/> Reference No. 10360996
OWNER INFORMATION (Type or Print)			
Name	[REDACTED]		Daytime Telephone Number
Address	[REDACTED]		E-mail Address
City	PARMA HEIGHTS	State	OH
Zip Code	[REDACTED]	Evening Telephone Number	SAME
<p><i>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).</i></p>			
VEHICLE INFORMATION			
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side 1FAPP10P3WW [REDACTED]		Make FORD	Model ESCORT
Model Year 1998		Engine: No: Cylinders 4	Fuel Type: REG.
Date Purchased 2-17-1998	Dealer's Name and Telephone Number SOUTH WEST FORD - (410)-888-2600		
Original Owner <input type="checkbox"/>	Dealer's City PARMA HTS.	State OHIO	Zip Code 44130
Transmission Type AUTO	<input type="checkbox"/> Antilock Brakes <input type="checkbox"/> Cruise Control	Powertrain	Multiple Failure: REAR SPRINGS
		Incident Date(s) 16-OCT-2010	
FAILED COMPONENT(S)/PART(S) INFORMATION			
Vehicle Component Code: 022000 SUSPENSION: REAR		Failure Mileage 26000	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: DOTM9ABC036)	<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 <i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i>			
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths
		Reported to Police N	
<p>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).</p>			
<p>TL*THE CONTACT OWNS A 1998 FORD ESCORT. THE CONTACT STATED THAT THE REAR COIL SPRINGS BROKE IN 2003 AND WERE REPAIRED. THE VEHICLE WAS AT A REPAIR SHOP GETTING AN OIL CHANGE WHEN THE CONTACT WAS INFORMED THAT THE REAR COIL SPRINGS HAD BROKEN AGAIN. THE VEHICLE HAD NOT BEEN INSPECTED OR REPAIRED. THE CURRENT AND FAILURE MILEAGES WERE APPROXIMATELY 26,000.</p>			
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.		ATTACH ADDITIONAL SHEETS IF NECESSARY	
<p>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.</p>			

Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies)

I FEEL THAT THE REAR SPRINGS ON MY CAR ARE NOT STRONG ENOUGH, AND OR NOT MADE CORRECTLY.

IF THE SPRING BREAKS AND IT CAN STAB THE TIRE, CAUSING A FLAT TIRE, OR BLOW-OUT.

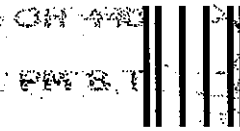
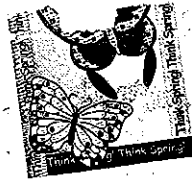
ATTACH ADDITIONAL SHEETS IF NECESSARY

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



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

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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

