



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  
**MAR - 5 2012**

Repository

10-FEB-2012

Reference No.  
10447405

**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City NORTH LIBERTY State IN Zip Code [REDACTED]

Daytime Telephone Number [REDACTED] E-mail Address [REDACTED]  
Evening Telephone Number [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: 2FAFP74W9WX [REDACTED]  
Make FORD Model CROWN VICTORIA Model Year 1998  
Date Purchased [REDACTED] Dealer's Name and Telephone Number 1-800-448-0459 OLIVER FORD 219-936-4066 Engine: No: Cylinders 8 Fuel Type: REG/9M  
Original Owner  Dealer's City PLYMOUTH State IN Zip Code [REDACTED]  
Transmission Type [REDACTED]  Antilock Brakes  Cruise Control Powertrain [REDACTED] Multiple Failure: [REDACTED] Incident Date(s) 04-JAN-2012

**FAILED COMPONENT(S)/PART(S) INFORMATION**

Vehicle Component Code: 020000 SUSPENSION Failure Mileage 70000 Failure Speed 45

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Make [REDACTED] Tire Model (Name or Number) [REDACTED] Tire Size (Example P215/65R15) [REDACTED]  
DOT No. (Example: DOTM19ABC036)  Original Equipment  Prior Repair Failure Location: [REDACTED]  
Tire Component Code [REDACTED] Tire Failure Type: [REDACTED]

**ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE**

Make: [REDACTED] Date Manufactured: [REDACTED] Model No./Name: [REDACTED]  
Seat Type: [REDACTED] Installation System: [REDACTED]  
Child Seat Component Code: [REDACTED] Failed Part: [REDACTED]

**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 [REDACTED] Number of Deaths [REDACTED] 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 CROWN VICTORIA. THE CONTACT STATED THAT WHILE DRIVING 45 MPH, THE VEHICLE DRIFTED FROM RIGHT TO LEFT AND HE HAD DIFFICULTY STEERING STRAIGHT. THE VEHICLE WAS TAKEN TO AN AUTHORIZED DEALER TO HAVE THE FAILURE DIAGNOSED AND THE DEALER STATED THAT THE LOWER BALL JOINTS AND UPPER CONTROL ARMS NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE FAILURE MILEAGE WAS 70,000 AND THE CURRENT MILEAGE WAS 78,000.

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 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)

NOTE: WENT TO WRB SITE ON COMPUTER / IT STATES ALL 1998 CROWN  
VICTORIAS ON RECALL LIST; HAVE CALLED TWO DEALERS THEY HAVE  
NO RECALL ON THIS ONE ACCORDING TO THE VIN & WHY WOULD  
THEY SAY ALL & NO INDICATE THIS PARTICULAR ONE.

THANK YOU FOR ANY HELP YOU MAY GIVE;

THIS COST \$280.00 TO GET REPAIRED;

THANK YOU AGAIN



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 466

24 FEB 2012 11 11

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES



**BUSINESS REPLY MAIL**  
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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



200779382



Think your vehicle has a safety defect?



If so:  
Use the enclosed form to file a report.

or visit:  
[www.safercar.gov](http://www.safercar.gov)

or call:  
Vehicle Safety Hotline  
888-327-4236



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