



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-NASH-2-DOT  
(1-888-327-4236)  
INTERNET: www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received  
**SEP 25 2012**  
27-AUG-2012

Repository   
Reference No.  
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**OWNER INFORMATION (Type or Print)**

Name [REDACTED]  
Address [REDACTED]  
City **WILDOMAR** State **CA** 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: **1FTXW43R78E [REDACTED]**  
Make: **FORD** Model: **F-450 SD** Model Year: **2008**  
Date Purchased: **02-17-2008** Dealer's Name and Telephone Number: **HEMBOURG FORD 951-737-6151** Engine: No. Cylinders: **8** Fuel Type: **DIESEL**  
Original Owner:  Dealer's City: **NORCO** State: **CA** Zip Code: **92860**  
Transmission Type: **AUTO**  Antilock Brakes Powertrain: Multiple Failure: Incident Date(s): **20-AUG-2012**  
 Cruise Control

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

Vehicle Component Code: **010000 STEERING** Failure Mileage: **55000** Failure Speed: **55**

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

Tire Make: **CONTINENTAL** Tire Model (Name or Number): **HDR** Tire Size (Example P215/65R15): **225/70 19.5**  
DOT No. (Example: DOTM19ABC036):  Original Equipment  Prior Repair Failure Location: **PERRIS CA**  
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 2008 FORD F450 SD. THE CONTACT STATED WHILE DRIVING 55 MPH HE FELT AS IF THE VEHICLE WAS LOSING POWER OF THE STEERING WHEEL AND BRAKES. THE VEHICLE WAS TAKEN TO THE DEALER FOR DIAGNOSIS. THE DEALER STATED THAT THE POWER STEERING BOX NEEDED TO BE REPLACED. THE VEHICLE WAS NOT REPAIRED. THE MANUFACTURER WAS NOT CONTACTED. THE FAILURE AND THE CURRENT MILEAGE WAS 55,000.

WORK: [REDACTED]

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.