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Form Approved: O.M.B. No. 2127-0008



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

DOT Auto Safety Hotline  
**Vehicle Owner's Questionnaire**  
TO REPORT VEHICLE SAFETY DEFECT  
1-888-DASH-2-DOT  
1-888-327-4236  
INTERNET: <http://www.nhtsa.dot.gov>

RECEIVED AGENCY USE ONLY

Date Received

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Reference No.

550176

OFFICE DEFECTS INVESTIGATION

OWNER INFORMATION (Type or Print)

Dealer Telephone Number

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.

Signature of Owner

Date 12/16/99

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) (17 Digits) 1FALP52U1TA317778	(Located at bottom of windshield on driver's side)	Vehicle Make Ford	Vehicle Model Taurus	Vehicle Year 1996	Current Odometer Reading 50500X
Purchased Date 10/98	Dealer's Name Van Skiver Motors	Engine Size (CID/CC/L) 3L	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection	Dealer's City Watkins Glen	State N.Y.
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Zip Code 14891	No. Cylinders 6	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Antilock Brakes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passengerside Airbag <input checked="" type="checkbox"/> 2-Point Belt <input type="checkbox"/> 3-Point Belt
Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drivetrain <input checked="" type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input checked="" type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input checked="" type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other		

FAILED COMPONENT(S)/PART(S) INFORMATION

Component Park	Part Name(s) Repaired loose shifter inside steering column	Location <input type="checkbox"/> Left <input type="checkbox"/> Front <input type="checkbox"/> Right <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement
No. of Failures 1	Date(s) of Failure(s) 12/9/99	Failed Part(s) Available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Mileage at Failure(s) 50,200		
	Vehicle Speed at Failure(s): Car was to have been parked		

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and Injury(ies) on the back of this form)

Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number Persons Injured 0	Number of Fatalities 0	Estimated Property Damage \$ 1433.00	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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INFORMATION ON TIRE FAILURE(S) (IF APPLICABLE)

To report defective or failed tires provide the following: DOT Number, Tire Manufacturer, Tire Name, Tire Size (include all numbers and letters).  
Note: This information not required for normal operation tires.

DOT	Manufacturer	Tire Name	Complete Tire Size
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**TIRE SIZE**

**TIRE NAME**

**TIRE MANUFACTURER**

**U.S. DOT safety standard code**  
The number may be on the inner side of the tire and have up to 11 letters and numbers. Usually located near rim flange on side opposite whitewall or on either side of blackwall tire.

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 maybe used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administration 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)

I parked my car and put the automatic transmission into park. I took out the key and locked the car door. I walked across the street and into a house. Five minutes later there was a knock on the door and I was informed my car had rolled backwards and across the road into a small driveway where a truck was parked. This caused damage to the back of both vehicles. The next day I brought the car to a dealership. According to the service manager at Route 104 Ford Mercury, Inc., Camargo, NY, he sat in the car and put it in and out of park for one minute. Though the car held some of the time he noted that twice it did not grab and instead acted like a car left in neutral instead of park. Had I been less lucky the car could have rolled over a child or gone into heavy traffic causing a more serious accident.

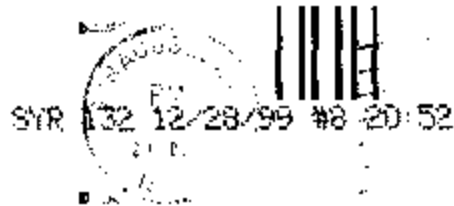
ATTACH ADDITIONAL SHEETS IF NECESSARY

U.S. Department of Transportation

National Highway Traffic Safety Administration

400 Seventh St., S.W. Washington, D.C. 20590

Official Business Penalty for Private Use \$300



NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES

**BUSINESS REPLY MAIL**  
FIRST CLASS PERMIT NO 73173 WASHINGTON, D.C.

POSTAGE WILL BE PAID BY NATL. HWY. TRAFFIC SAFETY ADMIN.



U.S. Department of Transportation  
National Highway Traffic Safety Administration  
DOT Auto Safety Hotline, NSA-10.1  
400 7th Street, SW  
Washington, DC 20590



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OWNER'S  
QUESTIONNAIRE**

**DOT AUTO SAFETY HOTLINE**

TO REPORT VEHICLE SAFETY DEFECTS  
COMPLETE THIS FORM  
OR

**DASH2DOT**

and dial toll free at

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(DASH) 2 DOT



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