



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

**POSTED**  
Date Received: **10 OCT -5 PM 4:06**  
OFFICE DEFECTS INVESTI  
**555445**  
Reference No. \_\_\_\_\_  
Copied

**OWNER INFORMATION (Type or Print)**

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle?  YES  NO  
in the absence of an authorized NHTSA agent to the vehicle manufacturer.

Signature of Owner: \_\_\_\_\_ Date: **9/24/00**

Vehicle Identification No. (VIN) (17 Digits) <b>1F A F P S 2 S L W A 2 6 0 1 1 9</b>		Make <b>FORD</b>	Model <b>Taurus</b>	Year <b>98</b>
Purchased Date <b>7/16/98</b>	Dealer's Name <b>Hillside Auto Mall</b>		Engine Size (CID/CC/L) <b>6</b>	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City <b>Hillside</b>	State <b>NJ</b>	Zip Code	No. Cylinders
Manufacture Date (on driver's door or pillar) <b>5/98</b>	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driver's Side Air Bag <input type="checkbox"/> Motorbelt <input checked="" type="checkbox"/> Passenger's Side Air Bag <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"/> 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**

Part Name(s) <b>ABS</b>	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input type="checkbox"/> Replacement	Handicap Adaptive Equip <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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**TO BE COMPLETED WHEN REPORTING A TIRE FAILURE**

Tire Brand	Tire Name	Complete Tire Size
No. of Failures	Date(s) of Failure(s) Mileage at Failure(s) Vehicle Speed at Failure(s):	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No
		NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICABLE INCIDENT INFORMATION**

(Please describe in detail the Incident(s), Failure(s), Crash(es), and Injury(ies). Attach photos if available.)

Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured <b>0</b>	Number of Fatalities <b>0</b>	Reported to Manufacturer <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Narrative Description of Incident(s), Failure(s), Crash(es), and Injury(ies).  
Several times at slow speeds, I braked and the car skidded but skidded forward. I felt a vacuum under my foot. I took it to the tire shop & it happened more often. This last time I was slowing to a stop at a stop sign, again at a slow speed. The car once again failed to stop. I went into a car wash of course to get the car off. Continue on back.

The Privacy Act of 1974 - Public Law 93-579 This information is requested pursuant to 49 U.S.C. Chapter 301. You are under no obligation to respond to this questionnaire. Your response may be used to assist NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If 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)

They said as long as there is no recall, that's all they care about. The dealers were also here & told me to go see Ford. Ford wrote me a letter saying the case is closed since my ms co was covering the cost they're only fixing the damage to the car body. Nothing about the ~~brakes~~ brakes.

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  
Office of Defects Investigation, NSA-10.01  
400 7th Street, SW  
Washington, DC 20590



Complete and return or place in your car manual for future use



**VEHICLE OWNER'S QUESTIONNAIRE (VOQ)**

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COMPLETE THIS FORM  
OR

**DASH 2 DOT**

and dial toll free at

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1-888-327-4236

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