



**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

Date Received: **JAN 24 AM 11:17**

OFFICE DEFECTS INVESTIG

Reference No. **559157**

Daytime Telephone Number: [Redacted]

OWNER INFORMATION (Type or Print)

Name: [Redacted]
Street: [Redacted]
City: [Redacted]

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: [Redacted]

Date: **07/12/01**

PRODUCT INFORMATION

Vehicle Identification No. (VIN.) (17 Digits) 1FTRX2769WNB02269		Make F250	Model EXT CAB	Year 98
Purchased Date	Dealer's Name METRO FORD	Engine Size (CID/CCL) V-8	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input checked="" type="checkbox"/> Gas	
<input type="checkbox"/> New <input type="checkbox"/> Used	Dealer's City MIAMI	State FL	Zip Code	No. Cylinders 8 <input type="checkbox"/> Fuel Injection
Manufacture Date (on driver's door or pillar)	Transmission Type <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic	Restraint System <input checked="" type="checkbox"/> Driverside Air Bag <input type="checkbox"/> Passengerside Air Bag <input checked="" type="checkbox"/> 3-Point Belt <input type="checkbox"/> Molobelt <input type="checkbox"/> 2-Point Belt	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive/Brake <input type="checkbox"/> Front <input checked="" type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel
		Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Van <input type="checkbox"/> Minivan <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other 3.5 Sport	

FAILED COMPONENT(S)/PART(S) INFORMATION

Part Name(s) Suspension System Body FRAME	Location <input checked="" type="checkbox"/> Left <input type="checkbox"/> Front <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Rear	Failed Part(s) <input checked="" type="checkbox"/> Original <input checked="" 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0 TO DATE	Number of Fatalities 0 TO DATE	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):
1/12 - SPENT FOR REPAIR TO SUSPENSION & FRAME \$12,000.00 ISSUE NOT RESOLVED. 6 mo. OLD FRAME IS WARPED. THIS SAME PROBLEM STARTED OVER 2 YEARS AGO. FORD ENGINEER CONTACTED FIRST WEEK OF JANUARY 2001. HOMESTEAD WORLD FORD TELLS ME, "SEVERAL WEEKS OR MONTHS" BEFORE A REPRESENTATIVE WILL BE AVAILABLE TO INSPECT MY VEHICLE. SERV. REP DON CALL POINTED OUT I AM IN A VEHICLE NOT DESIGNED FOR MY PURPOSES. THREE PEOPLE RELEASED TO ME A REPAIRED VEHICLE WITH A BROKEN FRAME & LET ME DRIVE INTO THE HIGHWAY.

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)

THE BREAK WAS 100% VISABLE WHILE MAKING MAJOR REPAIRS.
 4 of SUSPENSION REPAIR MADE 12-23-00 AT HOMESTEAD WORLD
 FORD. 12-26-00 KENDALL WORLD FORD BODY SHOP FOUND
 SUSPENSION BROKE. I PAID \$\$\$ 1,000.00 FOR THE REPAIR
 & \$600.00 FOR RENTAL VEHICLE, SINCE IT WAS A 10 DAY
 REPAIR. I SPENT \$1,600.00 FOR A BAD REPAIR.
 I AM NOW DRIVING WITH A WARPED FRAME THAT POTENTIALLY
 COULD BREAK WHILE DRIVING.
 ALTHOUGH THIS IS NOT A COMMON PROBLEM &
 THE SUSPENSION ON THIS VEHICLE IS UNUSUAL I HAVE A PROBLEM
 THAT HAS COSTED ME OVER \$12,000.00 AND STILL PERSIST. IT
 IS A SAFETY PROBLEM. IT IS THE MANUFACTURERS CONCERN.
 PLEASE HELP RESOLVE THIS ISSUE.

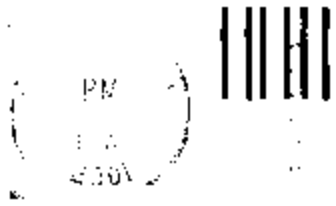
ATTACH ADDITIONAL SHEETS IF NECESSARY

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)

DOT AUTO SAFETY HOTLINE

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DASH 2 DOT

and dial toll free at

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1-888-327-4236

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

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