

 U.S. Department of Transportation National Highway Traffic Safety Administration		AUTO SAFETY HOTLINE VEHICLE OWNER'S QUESTIONNAIRE NATIONWIDE 1-800-424-9393 DC METRO AREA 202-366-9129		FOR AGENCY USE ONLY DATE RECEIVED RECEIVED 01 FEB 26 AM 11:14 OFFICE OF DEFECTS INVESTIGATION 559838 REFERENCE NO. QC'd	
OWNER INFORMATION (TYPE OR PRINT)				od. or STATE ZIP	
NAME				DATE (CODE)	
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES <input type="checkbox"/> NO <input type="checkbox"/> In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
SIGNATURE OF OWNER				DATE	
VEHICLE INFORMATION					
VEHICLE IDENTIFICATION NO. 1FDKE10S4VHA61531		VEHICLE MAKE FORD		VEHICLE MODEL E-450	MODEL YEAR 1997
*LOCATED AT BOTTOM OF WINDSHIELD ON DRIVER'S SIDE					
CURRENT ODOMETER READING		DATE PURCHASED	DEALER'S NAME, CITY & STATE		ENGINE SIZE (CID/CC/L) NO. CYLINDERS
		<input checked="" type="checkbox"/> NEW <input type="checkbox"/> USED			<input type="checkbox"/> TURBO <input type="checkbox"/> DIESEL <input type="checkbox"/> GAS <input type="checkbox"/> FUEL INJECTN
TRANSMISSION TYPE	ANTILOCK BRAKES	RESTRAINT SYSTEM		CRUISE CONTROL	DRIVETRAIN
<input type="checkbox"/> MANUAL <input checked="" type="checkbox"/> AUTOMATIC	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> DRIVERSIDE AIRBAG <input type="checkbox"/> MOTORBELT <input type="checkbox"/> PASSENGERSIDE AIRBAG <input type="checkbox"/> 3-POINT BELT <input type="checkbox"/> 2-POINT BELT		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> 4-WHEEL
BODY STYLE					
STAWAG		HATCH BK		<input type="checkbox"/> 4 DR <input type="checkbox"/> 2 DR <input type="checkbox"/> VAN <input type="checkbox"/> PK UP TRK <input type="checkbox"/> OTHER	
FAILED COMPONENT(S)/PART(S) INFORMATION (REPORT TIRE INFORMATION ON BACK)					
COMPONENT	PART NAME(S)	LOCATION		FAILED PART(S)	
STRUCTURE (131000000)	FRONT CROSS MEMBER	<input type="checkbox"/> LEFT FRONT <input checked="" type="checkbox"/> RIGHT FRONT		<input type="checkbox"/> ORIGINAL <input checked="" type="checkbox"/> REPLACEMENT	
NO. OF FAILURES	DATE(S) OF FAILURE(S)		MANUFACTURER CONTACTED		NHTSA PREVIOUSLY CONTACTED
(03)	1/30/97		<input type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
	MILEAGE AT FAILURE(S)				
	99739				
	VEHICLE SPEED AT FAILURE(S)				
APPLICABLE ACCIDENT INFORMATION					
ACCIDENT	FIRE	NUMBER PERSONS INJURED	NUMBER OF FATALITIES	PROPERTY DAMAGE ESTB	POLICE REPORTED
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				<input type="checkbox"/> YES <input type="checkbox"/> NO
NARRATIVE DESCRIPTION OF FAILURE(S), ACCIDENT(S), INJURY(IES)					
FRONT CROSS MEMBER CRACKING AT MAIN FRAME. FORD HAS ISSUED A SERVICE BULLETIN #991411 TO ADDRESS THIS CONDITION.					
CONTINUE ON BACK IF NEEDED					
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.		