

U.S. Department
of TransportationNational Highway
Traffic Safety
AdministrationDOT Auto Safety Hotline
Vehicle Owner's Questionnaire (VOQ)NATIONWIDE 1-888-DASH-2-DOT
1-888-327-4236
www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 258

Date Received

31-MAR-2000

Oid_or _____
rt_dt _____
od_rt _____
up_ltr _____

Reference No.

720826

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

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN.) <small>(Listed at front of windshield or driver's side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
4M2DU55P8VUJ47458	MERCURY TRUC	MOUNTAINEER	1997	

Purchase Date 01-MAY-1999	Dealer's Name _____	Engine Size (CID/CC/L) 5.0L E	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection
<input type="checkbox"/> New <input checked="" type="checkbox"/> Used	City _____ State _____ Zip Code _____	No. Cylinders _____	

Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbell <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input checked="" type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Ult <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <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 type="checkbox"/> Pick Up Truck <input checked="" type="checkbox"/> Other _____
--	---	---	--	---	--	--

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 05150020 05150022 05150000	Par. Name(s) ENGINE:GASKETS ENGINE:GASKETS:OIL PAN ENGINE:OTHER PARTS	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Frnt <input type="checkbox"/> Rear	Failed Part(s) <input type="checkbox"/> Original <input type="checkbox"/> Replacement
---	--	---	---

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
-----------------	---	---	---

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form.)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---	---------------------------	----------------------	---------------------------	---

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

I DON'T KNOW THAT IF THIS IS THE RIGHT PLACE I NEED TO BE, BUT MY SUV HAS QUITE A BIT OF RUST UNDERNEATH AND IN THE WHEELS. I CAN SCRATCH SOME OFF WITH CHIPPING COMING OFF. I HAVE MET WITH THE DEALERSHIP AND THE FORD REP, THEY SAY I HAVE SURFACE RUST AND IT WON'T RUST THREW THE STEEL, IN MY LIFE TIME, AND I AM UNEASE ABOUT THAT. MY SEAT BELTS HAVE A SMELL TO THEM AND I FEEL LIKE IT HAS HAD SOME WATER DAMAGED TO IT, BUT I DO NOT FEEL SAFE IN IT, THEY HAVE HAD TO REPLACE GASKETS, OIL PAN, CRANKSHAFT REAR SEAL, AND REAR MAIN SEAL, AND IT IS IN THE SHOP NOW FOR A POPING SOUND. I NEED TO KNOW WHAT I CAN DO NEXT TO GET THIS MATTER TAKEN CARE OF. I HAVE NEVER SEEN THIS MUCH RUST. CAN YOU PLEASE HELP ME. AND GIVE ME THE RIGHT DIRECTION TO GO NOW. I THANK YOU SO MUCH.

CONTINUED ON BACK PLEASE

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.