Form Approved: O.M.B. No. 2127-0042

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

DOT 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: 08-AUG-2000

Od_or ____ ____
rt_dt ____ ____
od_rt ____ ____
up_ltr ____ ____

Reference No. 727048

[redacted]

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.) (Located at bottom of windshield on driver's side)	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading
1FDEE14H9THB16778	FORD TRUCK	ECONOLINE	1996	

Purchase Date: 01-OCT-1996
☒ New ☐ Used

Dealer's Name _____
City _____ State _____ Zip Code _____

Engine Size (CID/CC/L) 5.8L
No Cylinders _____

☐ Turbo
☐ Diesel
☐ Gas
☒ Fuel Injection

Transmission Type	Antilock Brakes	Restraint System	Cruise Control	Drive Train	Vehicle Type	Body Style
☐ Manual ☐ Automatic	☒ Yes ☐ No	☐ 3-Point Belt ☐ Driverside Airbag ☐ Passengerside Airbag ☐ Motorbelt ☐ 2-Point Belt	☒ Yes ☐ No	☐ Front ☒ Rear ☐ 4-Wheel	☐ Car ☒ Van ☐ Minivan ☐ Other ☐ Sport Utl ☐ Truck ☐ Motorcycle	☐ 2-Door ☐ 4-Door ☐ Stationwagon ☐ Pick Up Truck ☐ Other

FAILED COMPONENT(S)/PART(S) INFORMATION

Component	Par. Name(s)	Location	Failed Part(s)
12111000	INTERIOR SYSTEMS:PASSENGER RESTRAINTS:AIR BAG:FRONTA	☐ Left ☐ Right ☐ Front ☐ Rear	☐ Original ☐ Replacement

No of Failures	Date(s) of Failure(s)	Mileage at Failure(s)	Vehicle Speed at Failure(s)	Failed Part(s) Available?	NHTSA Previously Contacted?
2	28-JUN-2000	64000	10	☐ Yes ☐ No	☐ Yes ☐ 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	Fire	Number of Persons Injured	Number of Fatalities	Estimated Property Damage	Reported to Police
☐ Yes ☐ No	☐ Yes ☒ No	1	0		☐ Yes ☒ No

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

ON JUNE 28, 2000, MY WIFE MADE A LEFT HAND TURN. AS SHE WAS TURNING THE ENGINE WENT COMPLETLY DEAD, POWER STEERING GOES OUT AND A YELLOW LIQUID SHOOTS OUT FROM THE STEERING COLUMN ON TO THE DASHBOARD AND ON MY WIFE'S LEGS CAUSING THE SKIN TO BURN. THIS WAS ACCOMPANIED WITH NOXIOUS FUMES CAUSING MY WIFE AND TWO OTHER PASSENGERS TO COUGH AND TO EVACUATE THE VAN. THE VAN STARTED BACK UP AFTER THIS INCIDENT. ON JULY 2 & 3, 2000 WE TOOK THE VAN TO A1 AUTO CARE IN HOBE SOUND, FL. THEY CHECKED FOR POTIENTIAL ANTIFREEZE LINE LEAKS, CHECKED THE AIR BAG COMPONENTS AND DISCOVERED SOME OF THE YELLOW LIQUID ON THE STEERING COLUMN. THEY WERE UNABLE TO SEE ANYTHING WRONG WITH THE AIR BAG ITSELF. THEY CALLED THE FORD TECH. SUPPORT LINE AND COULD NOT COME UP WITH AI

CONTINUED ON BACK IF NEEDED