

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

FOR AGENCY USE ONLY 258	
Data Received	Od_or _____ rt_dt _____ od_rt _____ up_ltr _____
30-SEP-2000	
Reference No. 732999	

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 drivers side)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
1FTNX21FXE08155	FORD TRUCK	F250	2000			
Purchase Date 01-DEC-1999	Dealer's Name _____		Engine Size (CID/CYL) 7.3L	<input checked="" type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
<input checked="" type="checkbox"/> New <input 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 checked="" type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION			
Component 03270000 08000000 02700000	Par. Name(s) BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM ELECTRICAL SYSTEM TIRES	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 2	Date(s) of Failure(s) 01-SEP-2000	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Mileage at Failure(s) _____		
	Vehicle Speed at Failure(s) 45		

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

WE FIRST HAD THE FRONT BRAKES PULL RIGHT WE HAD THE TRUCK IN 2-3 TIMES FOR THAT PROBLEM THEY FINALLY FIXED IT. BUT NOW THE BRAKES PULL LEFT. THEY DO NOT KNOW HOW TO FIX THE PROBLEM. THE ENGINE/ELECTRIAL PROBLEM. ALL OF THE SUDDEN EVERYTHING ELECTRICAL QUITS WORKING. I DIDN'T KNOW HOW TO CLASSIFY THIS PROBLEM. THEY REPLACE A MODULE AND IT STILL HAPPENS. WE ARE AWAITING FOR THEM TO FIX AGAIN. ON THE TIRES ONE BLEW OUT IN THE MIDDLE OF THE NIGHT ON A VERY DARK ROAD 1 MILE FROM THE HOUSE MY HUSBAD DROVE IT HOME TOOK IT IN THE NEXT DAY AND THE REFUSED TO FIX BECAUSE HE DROVE ON IT. APPROX A MONTH LATER WE WERE ON A ROAD DRIVING ONLY APPROX 45 MPH. MY HUSBAND FELT SOMETHING WHEN WE WERE AT A LIGHT,WE PULLED IN TO A STORE JUST PASSED THE LIGHT GOT OUT AND THE BACK RIGHT TIRE HAD

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.

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Purchase Date 01-DEC-1999	Dealer's Name _____		Engine Size (CID/CYL) 7.3L	<input checked="" type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injection		
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