



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

Data Received 02-OCT-2000	Od_or _____
	rt_dt _____
	od_rt _____
	up_ltr _____
Reference No. 733255	

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> 2FTEF14YOTCA02743	Vehicle Make FIRESTONE	Vehicle Model DAYTONA RADIAL	Vehicle Year 1900	Current Odometer Reading
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Purchase Date 01-FEB-1996	Dealer's Name _____	Engine Size (CID/CC/L) 5.9	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" 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 checked="" type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Belt <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input checked="" 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 _____
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FAILED COMPONENT(S)/PART(S) INFORMATION

Component 02700000	Par. Name(s) 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
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No of Failures 1	Date(s) of Failure(s) 20-SEP-2000 Mileage at Failure(s) 84000 Vehicle Speed at Failure(s) 55	Failed Part(s) Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously Contacted? <input type="checkbox"/> Yes <input type="checkbox"/> No
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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 0	Number of Fatalities 0	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)

DRIVING ON THE HIGHWAY THE TREAD SEPARATED FROM THE TIRE. THE TIRE DID NOT DEFLATE. THE TREAD DID EXTENSIVE DAMAGE TO THE TRUCK. IT ALMOST SEVERED BOTH GAS LINES, TORE OFF WHEEL SKIRTS, DAMAGED REAR 1/4 PANEL TO THE POINT THAT IT NEEDS TO BE REPLACED, DAMAGED PART OF THE REAR BUMPER, AND NOW I NOTICE THE REAR GAS TANK IS NOT VENTING PROPERLY. I TOOK PICTURES OF TRUCK AND TIRE. ON THE REMAINING REAR TIRE YOU CAN SEE WHERE THE TREAD IS GOING TO PEEL OFF. I HAVE E-MAILED AND PHONED FIRESTONE ALL WEEK AND GET NO RESPONSE AT ALL. I AM A SELF EMPLOYED CARPENTER AND NEED MY TRUCK TO FUNCTION PROPERLY. I ONLY WANT THE REPAIRS TO BE PAID FOR BY FIRESTONE, NO LEGAL ACTION SHOULD BE NECESSARY, I WAS NOT INJURED. *AK (DOT NUMBER: VD60 U6A TIRESIZE: 31X10.5 15)

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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2FTEF14YOTCA02743	FORD TRUCK	F150	1996	

Purchase Date 01-FEB-1996	Dealer's Name _____	Engine Size (CID/CC/L) 5.9	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Fuel Injection
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