



**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 07-OCT-2000	Od_or _____
	rt_dt _____
	od_rt _____
	up_ltr _____
Reference No. 733672	

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 top of windshield or drivers side)</small> 1FTHX26F2VEC28517	Vehicle Make FIRESTONE	Vehicle Model STEELTEX	Vehicle Year 1900	Current Odometer Reading
---	----------------------------------	----------------------------------	-----------------------------	--------------------------

Purchase Date 01-JUL-2097	Dealer's Name _____	Engine Size (CID/CYL) 7.3L	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" 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 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
------------------------------	------------------------------	---	---

No. of Failures 1	Date(s) of Failure(s) 24-MAR-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) 32000		
	Vehicle Speed at Failure(s) 50		

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

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

THE FOLLOWING IS THE TEXT OF A LETTER THAT I SENT TO FIRESTONE ON 8-10-2000. ALL THAT THEY DID WAS SEND ME FORM LETTER THAT DIDN'T EVEN APPLY TO MY TIRE. CAN YOU ASSIST IN OBTAINING COMPENSATION?: IN 1997, I PURCHASED A NEW 1997 FORD F-250 EXTENDED CAB LWB DIESEL TRUCK (FROM VALLEY FORD IN ONEONTA, AL). IT CAME EQUIPPED WITH FIRESTONE "STEELTEX RADIAL A/T LT 235 85 R16 M/S" TIRES.I WAS VERY CAREFUL TO MAINTAIN THE PROPER TIRE PRESSURE AND STAY WELL UNDER THE RATED CARRYING CAPACITY AT ALL TIMES FOR SAFETY REASONS. ON 3-24-2000, APPROXIMATELY 40 MILES AFTER I HAD (COINCIDENTALLY, I SUPPOSE) CHECKED FOR THE PROPER PRESSURES AND CAREFULLY INSPECTED ALL THE TIRES, WHILE LOADED AT OVER 1 TON LESS THAN THE BED CARRYING CAPACITY, TRAVELLING AT ABOUT 50 MPH AFTER DARK

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.



**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 07-OCT-2000	Od_or _____
	rt_dt _____
	od_rt _____
	up_ltr _____
Reference No. 733672	

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 top of windshield or drivers side)</small> 1FTHX26F2VEC28517	Vehicle Make FORD TRUCK	Vehicle Model F250	Vehicle Year 1997	Current Odometer Reading
---	-----------------------------------	------------------------------	-----------------------------	--------------------------

Purchase Date 01-JUL-2097	Dealer's Name _____	Engine Size (CID/CC/L) 7.3L	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" 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 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
------------------------------	------------------------------	---	---

No of Failures 1	Date(s) of Failure(s) 24-MAR-2000	Mileage at Failure(s) 32000	Vehicle Speed at Failure(s) 50	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 0	Number of Fatalities 0	Estimated Property Damage	Reported to Police <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---	---------------------------------------	----------------------------------	---------------------------	---

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

THE FOLLOWING IS THE TEXT OF A LETTER THAT I SENT TO FIRESTONE ON 8-10-2000. ALL THAT THEY DID WAS SEND ME FORM LETTER THAT DIDN'T EVEN APPLY TO MY TIRE. CAN YOU ASSIST IN OBTAINING COMPENSATION?: IN 1997, I PURCHASED A NEW 1997 FORD F-250 EXTENDED CAB LWB DIESEL TRUCK (FROM VALLEY FORD IN ONEONTA, AL). IT CAME EQUIPPED WITH FIRESTONE "STEELTEX RADIAL A/T LT 235 85 R16 M/S" TIRES. I WAS VERY CAREFUL TO MAINTAIN THE PROPER TIRE PRESSURE AND STAY WELL UNDER THE RATED CARRYING CAPACITY AT ALL TIMES FOR SAFETY REASONS. ON 3-24-2000, APPROXIMATELY 40 MILES AFTER I HAD (COINCIDENTALLY, I SUPPOSE) CHECKED FOR THE PROPER PRESSURES AND CAREFULLY INSPECTED ALL THE TIRES, WHILE LOADED AT OVER 1 TON LESS THAN THE BED CARRYING CAPACITY, TRAVELLING AT ABOUT 50 MPH AFTER DARK

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.



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 07-OCT-2000	Od_or _____
	rt_dt _____
	od_rt _____
	up_ltr _____
Reference No. 733672	

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> 1FTHX26F2VEC28517	Vehicle Make FORD TRUCK	Vehicle Model F250	Vehicle Year 1997	Current Odometer Reading
---	-----------------------------------	------------------------------	-----------------------------	--------------------------

Purchase Date 01-JUL-1997	Dealer's Name _____	Engine Size (CID/CYL) 7.3L	<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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input checked="" 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 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
------------------------------	------------------------------	---	---

No. of Failures 1	Date(s) of Failure(s) 24-MAR-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) 32000		
	Vehicle Speed at Failure(s) 50		

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

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

THE FOLLOWING IS THE TEXT OF A LETTER THAT I SENT TO FIRESTONE ON 8-10-2000. ALL THAT THEY DID WAS SEND ME FORM LETTER THAT DIDN'T EVEN APPLY TO MY TIRE. CAN YOU ASSIST IN OBTAINING COMPENSATION?: IN 1997, I PURCHASED A NEW 1997 FORD F-250 EXTENDED CAB LWB DIESEL TRUCK (FROM VALLEY FORD IN ONEONTA, AL). IT CAME EQUIPPED WITH FIRESTONE "STEELTEX RADIAL A/T LT 235 85 R16 M/S" TIRES. I WAS VERY CAREFUL TO MAINTAIN THE PROPER TIRE PRESSURE AND STAY WELL UNDER THE RATED CARRYING CAPACITY AT ALL TIMES FOR SAFETY REASONS. ON 3-24-2000, APPROXIMATELY 40 MILES AFTER I HAD (COINCIDENTALLY, I SUPPOSE) CHECKED FOR THE PROPER PRESSURES AND CAREFULLY INSPECTED ALL THE TIRES, WHILE LOADED AT OVER 1 TON LESS THAN THE BED CARRYING CAPACITY, TRAVELLING AT ABOUT 50 MPH AFTER DARK

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.